Interprofessional education—
IPE
at the Faculty of Health Sciences, Ben-Gurion university of the Negev

“None of us is as smart as all of us.”
Ken Blanchard

IARC Meeting
12.2014
Prof. Asher Bashiri
Interprofessional Education (IPE)

- Two or more professions learn with from and about each other to improve collaboration and the quality of care.

CAIPE-a definition, 2007
The current status and barriers

- Snobbism
- Lack of control - who is in charge
- No defined objectives
- Bad examples
- Parallel teaching
- Lack of teachers' education
- Time consuming
- Resistant to change
- Loss of power
- Lacking of teaching module
- Lack of teachers' education
- Conflicts of interest
- Different timetables
- Logistics
USA IPE visit October 2012

- University of Kentucky.
- Medical University of South Carolina.
- Jefferson Medical College.
- Cornell Medical School.
- Hunter College.
- Columbia Medical School.
- University of Washington.
- University of Minnesota.
Schedule

- March 2012 - FOHS decision that IPE will be a part of the curriculum.
- Prof. Bashiri is chosen to lead the project.
- April 2012 - first work meeting, with the dean, the dean deputy for education, faculty schools' directors, clinical rounds heads.
- May 2012 - 2nd work meeting, with a designated team.
- May-July 2012 - launching of the 5th year medical students pilot in OBGYN rounds.
- June 2012 - 3rd work meeting, including the wider team of clinical round heads.
- 2013-2014-Curriculum
IPE partners...

**Medicine:** פרופ' גבריאל שרייבר, פרופ' קלריס ריזנברג, פרופ' דורון זגר, פרופ' אשר בשירו, פרופ'יעקב הנקין, פרופ'יעקב אורקין, ד"ר אבי הרלב, ד"ר איריס הם, ד"ר עידית ליברטי, ד"ר אורי יואל, ד"ר נטע לבנטל, פרופ' דבורה ליברמן, פרופ' רוברטו אומנסקי, פרופ' פסח שוורצמן, פרופ' איה בידרמן, ד"ר איליה וולקוב, פרופ' הווארד טנדטר, פרופ' גדי שקד, פרופ' חיים ביבי, ד"ר שרגא אבינר, ד"ר אורי נץ, ד"ר ברוך וינטראוב, ד"ר רניה עוקבי.

**Nursing:** פרופ'יעקב גופס, גב' לאה כהן, ד"ר אילנה ליפשיץ-ריבן, גב' קרן לויטין, גב' אריאלה קרן, גב' רגינה מויסא, גב' ננסי הורוביץ, גב' איריס רז, גב' סמדר מלכין, גב' מרטין כהן, גב' גיזל טל רוזן, גב' יעל נאור.

**Physiotherapy:** מר אלישע ורד, גב' פטריק שליסל, גב' גלית גרינברג.

**Pharmacology:** פרופ' ריאד אגבריה, ד"ר שמעון בן שבת.

**Social Work:** גב' אליה עוזיאל, גב' איריס ליבנה, גב' עינת אופיר.

**Emergency Medicine:** ד"ר לימור אהרונסון, ד"ר דגן שוורץ, מר אורן ווכט.

**Medical Laboratory:** פרופ'יעל שגב.

**Others:** מר הרצל גאן, גב' בתיה גובי, גב' בתיה קוטלר, גב' נירה לוי, גב' מאירה ראובני, פרופ' סמדר בן אשר, מר יוסי אזולאי.
Champions:

- December 2012 - Meeting with the faculty schools' directors and choosing IPE champions:
  - Nursing - Keren Levitin, Ariella Keren, Regina Moisa.
  - Physiotherapy - Elisha Vered, Galit Grinberg.
  - Emergency Medicine - Dagan Schwartz.
  - Medical Laboratory - Yael Segev.
Modules

- Academic year of 2012 – 2013:
- Introduction lectures for Medical, Nursing and Physiotherapy students during the 1st and 2nd semester: Medical students years 1st, 4th, 5th. Nursing and Physiotherapy years 1st, 2nd and 3rd.
- Group work for 4th year medical students + 3rd year nursing and physiotherapy students, 2nd semester.
- Group work for 1st year medical, nursing and physiotherapy students, 2nd semester.
- Group work for 5th year medical students + 2nd year nursing and physiotherapy students, 2nd semester.
Modules

Current projects
IPE This year's IPE course is a required course

The courses number for the first module is: 470-1-2000

The course number for the second module is: 470-1-2050

Course credit units have one for each unit, total 2 credit units
Unit 1

- Introductory lecture.
- IPE Definitions.
- IPE rationale.
- The current status.
- Goals of the teaching modules.
- Barriers.
- Core Competencies in IPE.
- Team Work.
**Course name:**
**Interprofessional Education (IPE)**

<table>
<thead>
<tr>
<th>Aims of the module:</th>
<th>Credits:</th>
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<tbody>
<tr>
<td>To expose students from medical professions to the various professions which surround them in the hospital and in the community, to improve team work and quality of care based on better understanding and communication.</td>
<td><strong>ECTS:</strong></td>
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</table>

**Academic year:**

Medical students: 1<sup>st</sup> to 6<sup>th</sup> year
Nursing and Physiotherapy students: 1<sup>st</sup> to 4<sup>th</sup> year

**Semester:**

1<sup>st</sup> and/or 2<sup>nd</sup> semesters

**Hours of instruction:**

According to the specific module
5. **Barriers**
   - Sense of loss of power and autonomy.
   - Resistance to change.
   - Loss of control – who is in charge?
   - Time consuming.
   - Time constraints in curriculum: discrepancies in schedules of different disciplines, different timetables.
   - And more...

6. **Core Competencies in IPE**
   - Values/Ethics for Interprofessional Practice.
   - Roles/Responsibilities for Collaborative Practice.
   - Interprofessional Communication.
   - Interprofessional Teamwork and Team-based Care.

7. **Team Work**
   - Designed to improve the quality, safety, and the efficiency of health care.
   - Teamwork depends on a willingness to cooperate, coordinate, and communicate while remaining focused on a shared goal of achieving optimal outcomes for all patients.

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**Introductory Lecture Module**

“None of us is as smart as all of us.”

Ken Blanchard

1. **IPE Definitions:**
   - Two or more professions learn with, from and about each other to improve collaboration and quality of care.

2. **IPE rationale:**
   - Increased complexity of patients and technology – require collaborative practice.
   - Variety of competencies optimizes multi-disciplinary intervention and care.
   - Group dynamics and resolution of conflicts.
   - Prioritization of patients’ outcome and safety (quality improvement).

3. **The current status:**
   - Parallel teaching.
   - Passive exposure.
   - Lack of teaching modules.
   - No defined objectives.
   - Lack of teachers’ education.
   - High exposure in clinical rotations.
   - Many bad examples.

4. **Goals of the teaching modules:**
   - Socializing while working together.
   - Learn to share problem solving and decision making.
   - Develop mutual understanding and respect.
   - Achieve the needed competencies for collaboration (knowledge, skills and values).
Unit 2

- 1st year Medical, Nursing and Physiotherapy students.

- Internal Medicine / Pediatrics / Gynecology.

- Explore treating the patient from different professional points of view, in mixed groups, preparing a presentation.
Each group will have a staff member who will accompany it in the learning process.

Each group should plan an additional meeting with their assigned staff member, a couple of weeks or more before the date of the presentation.

Keeping in touch with your group members—should be done via phone, Skype, emails, meeting in the hospital and any other means which are available to you.

3. **Work Plan:**
   A. In the days leading up to the group meeting, the students will carry out a work-up on a patient and this will be presented to the group. The patient should consent to being presented at this forum, and it is recommended to ask his permission to call him if more details are needed for the task.
   B. Group discussion to choose a suitable patient; try to select a patient that would benefit from a multi-professional approach.
   C. Creating a work plan in the group.
   D. Returning to the various departments, contacting relevant staff members.
   E. Preparing a presentation of your findings.

4. **Detailed work plan:**
   A. The students will carry out a work-up on a patient and this will be presented to the group:
      1. Try to choose a patient who will remain in the hospital for some time, so you can approach him as a small team to acquire the information which is needed for this task.

**Students’ Instruction Sheet**

1. **Interprofessional Education (IPE):**
   A new course in the Faculty of Health Sciences (FoHS), Ben Gurion University. The goal of this course is that different health professions’ students from the faculty will learn with, from and about each other, so in the future, in their work, they will be able to perform better team work and provide a safer and a more efficient environment for the patient.

   Today the situation is that students from each profession are learning separately and usually their first exposure to each other in a team at the hospital they start working in. Additionally the students are exposed throughout their clinical studies to various wrong behaviors of staff members toward each other, which could lead to miscommunication, lack of respect for each other and might hurt patient care.

   The FoHS decided to promote this subject and in fact this is the first faculty in Israel to incorporate this course in the curriculum.

   Our intentions are to form a solid framework in the FoHS, which will be built upon over the years during which the foundations of IPE will be learned and acted upon in clinical practice.

2. **Group Formation:**
   In this activity a group of students, drawn from 1st year medical, nursing and physiotherapy students, will be formed by the IPE staff.
Unit 3

- 4th year Medical, 3rd year Nursing and Physiotherapy students.

- Internal Medicine/ Pediatrics.

- Discharge/ Rehabilitation program for a chronic patient in mixed groups, preparing a presentation.
Each group will have a staff member who will accompany it in the learning process.

Each group should plan an additional meeting with their assigned staff member, a couple of weeks or more before the date of the presentation.

Keeping in touch with your group members – should be done via phone, Skype, emails, meeting in the hospital and any other means which are available to you.

3. **Work Plan:**
   A. In the days leading up to the group meeting, the students will carry out a work-up on a patient and this will be presented to the group. The patient should consent to being presented at this forum, and it is recommended to ask his permission to call him if more details are needed for the task.
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2. **Group Formation:**
In this activity a group of students, drawn from 4th year medical students and 3rd year nursing and physiotherapy students, will be formed by the IPE staff.
Unit 4

- 5\textsuperscript{th} year Medical, 2\textsuperscript{nd} year Nursing and Physiotherapy students.

- OBGYN rounds.

- Watch a movie showing how not working as a team can lead to treatment problems.

- Group discussion about the movie and personal examples brought by the students.
Each group will have a staff member who will accompany it in the learning process.

3. **Work Plan:**
   A. The students will complete a questionnaire regarding a personal experience they have had in the hospital, either as a student or a patient/patient's relative, seeing team work performed in a way that was not ideal.
   B. The students, in a group, will discuss the cases brought to them.
   C. The students will watch a movie showing how not working as a team can lead to treatment problems.
   D. There will be a discussion with the students about the points that should be corrected in the movie.
   E. The students will watch the corrected version of the movie.

4. **IPE Staff members:**
   - Prof. Asher Bashiri  abashiri@bgu.ac.il
   - Dr. Avi Harlev       harlev@bgu.ac.il
   - Dr. Shahar Geva      gevash@bgu.ac.il
   - Ms. Keren Levitin    kernl@bgu.ac.il
   - Ms. Ariel Keren      arkeren@bgu.ac.il
   - Ms. Regina Moisa     moisar@bgu.ac.il

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**IPE Teaching Module**

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2. **Group Formation:**
   In this activity a group of students drawn from 5th year medical students and 2nd year nursing and physiotherapy students, will be formed by the IPE staff.
זה סרט הנשראה לסוטודנית
בփקולשת لمدة 18 האירוח
באובירבריסטט ב- גוריון בנגב
interprofessional Education (IPE)
הסרט צומצום במרוכז עבור ליוויים
במרוכז הרפואית האוניברסיטאית סורוקה.
איך קשר בינ הנזקים והאירוחים במרץ האירוחים
Example cases given by students

1. A young girl who came to the internal medicine department with one-sided pain and requiring a very high dosage of pain relief medicine. In her workup, objective findings other than pain were found, but the nursing staff was not informed of that. The nurses practically screamed at her when she asked to get something for the pain. It made me think generally about pain relief medicine, and the importance of involving all of the treatment staff in the workup of patients.

2. During an internal medicine round in one of the hospitals, I saw a case in which a woman did not receive timely treatment, which later caused many medical problems for her, including disability. She arrived at the ER in a life-threatening situation, but because of miscommunication between the paramedics and the ER nurse the trauma room was not opened for her and it caused a delay in her treatment. Later on she was admitted to a department without the staff being properly informed and she did not get the medical attention she needed in the department. It was a very bad example of how doctors, nurses, paramedics and secretaries work together.

3. During my 3rd year, I was accompanying a Bedouin woman, with 7 previous deliveries, who was about to give birth. She asked for an epidural injection for the pain. Even though we had learned that week that epidural use should be encouraged, especially in this population, the midwife argued with her against it, and when the psychiatrist said no, the midwife continued to try to convince her. Eventually it was too late and the delivery was done without it. We later asked the doctor in charge about the claim the midwife had raised against the epidural, and his response was that it's practically superstition. It made me feel that there is no coordination between doctors and nurses, and that it was such a shame because this woman, who thanked the midwife thoroughly at the end, will spread this incorrect information.

4. I work in the ER, and I see a lot of examples of cases in which better teamwork could make patient care much more efficient. A very simple example is—each patient in the ER is allowed to have 1 person to accompany him. The security guard sometimes know / feel sorry for the patient and let them bring more people in. These people can create a lot of “fray” and distract the doctors who need to answer all their questions again and again, they make a lot of noise talking, and even if the chairs in the beds and other patients’ relatives cannot sit. This sort of “mayhem” could be very simple to solve and will improve work in the ER a lot.

5. One of my family members has gone through a redundant surgery due to miscommunication between doctors and nurses—which caused a wrong diagnosis and a surgery was not needed at all. All that was needed was some antibiotics for an infection which showed up on the blood work, but no one informed anyone about it.
IPE Day

- At the end of the year.
- Presentations by the 1\textsuperscript{st} year students - 25.05.2014 - morning
- Presentations by the 4\textsuperscript{th} year medical students, third year nursing and physiotherapy - 25.05.2014 - afternoon.
Pre-test questionnaire

Please complete the following questionnaire.

<table>
<thead>
<tr>
<th></th>
<th>Strongly agree</th>
<th>Agree</th>
<th>Undecided</th>
<th>Disagree</th>
<th>Strongly disagree</th>
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<tbody>
<tr>
<td>1. Learning with other students / professionals will make me a more effective member of a health and social care team</td>
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<td>2. Patients would ultimately benefit if health and social care students / professionals worked together</td>
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<td>3. Shared learning with other health and social care students / professionals will increase my ability to understand clinical problems</td>
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<td>4. Communications skills should be learned with other health and social care students / professionals</td>
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<td>5. Team-working skills are vital for all health and social care students / professionals to learn</td>
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<td>6. Shared learning will help me to understand my own professional limitations</td>
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<td>7. Learning between health and social care students / professionals before qualification and for professionals after qualification would improve working relationships after qualification / collaborative practice.</td>
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The effect of Interprofessional Education (IPE) activity on the opinions of Health Care students on the subject of IPE.

Prof. A. Bashiri, Dr. S. Geva, Dr. A. Harlev, Mrs. K. Levitin, Mrs. R. Moisa, Mrs. A. Keren, Mrs. I. Raz, Mrs. G. Grinberg, Dr. J. Urkin, Dr. T. Freud, Prof. G. Schreiber, Prof. K. Riesenberg.
Faculty of Health Sciences, Ben Gurion University of the Negev, Beer Sheva, Israel.

BACKGROUND:
In the last decade many universities have begun to integrate IPE into their curricula. The World Health Organization (WHO) has bolstered it and has published a ‘Framework for Action’ position paper which emphasizes how important IPE is for patient safety, health system efficiency and for the promotion of medical education in universities throughout the world.

The Faculty of Health Sciences’ administration, in partnership with, and with encouragement from, the Goldman Foundation, has decided to promote this subject and, in fact, it is the first faculty in Israel to incorporate a multi-year IPE course in its curriculum.

SUMMARY OF WORK:
The students completed an opinion questionnaire before and after the activity. The questionnaire was translated, and adapted, from the Readiness for Interprofessional Learning Scale (RIPLS) Questionnaire. For the purpose of statistical analysis we created 3 categories: "agree" (which included "strongly agree" and "agree"), "disagree" (which included "disagree and strongly disagree") and "uncertain".

SUMMARY OF RESULTS:
131 students from the Health Sciences faculty at Ben Gurion University participated in the study. There were 39 (30%) males and 91 (70%) females. The average age was 26.06 ± 2.65. There were 55 (42%) students from the medical, 46 (35.1%) students from the nursing and 30 (22.9%) students from the physiotherapy schools.

Prior to the activity 13 students (10%) agreed with the statement “Communication skills should be learned with other health care students” vs. 25 (19.1%) after the activity (p<0.05). Three students, prior to the activity, (6.2%) agreed with the statement “Shared learning will help me understand my own limitations” vs. 15 students (11.5%) after the activity. (p<0.05). Nine students, prior to the activity, (6.9%) agreed with the statement “Shared learning will help me to think positively about other professions” vs. 21 students (16.2%) after the activity (p<0.05). The remaining questions did not have a statistically significant difference.

CONCLUSION:
IPE activity among health care students affects their opinion of IPE in a positive way.
The effect of Interprofessional Education (IPE) activity on the opinions of Health Care students on the subject of IPE.

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CONCLUSION:

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New courses

- History of Medicine Course- for Students from all the schools in the Medical Faculty.
Dozor visiting professor

- Prof. Branda Zirler.
<table>
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<th>Day</th>
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<tr>
<td>Date</td>
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<td>08:00 - 09:00</td>
<td>Meeting with the Dean and others.</td>
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<td>09:00 - 10:00</td>
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<td>IPE day – lecture &amp; presentation for the 1st project.</td>
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<td>OBGYN South branch committee – IPE lecture.</td>
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<td>10:00 - 11:00</td>
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<td>Meeting with Hannah Zidenberg</td>
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<td>11:00 - 12:00</td>
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<td>IPE lecture and discussion FOHS medical education forum</td>
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<td>13:00 - 14:00</td>
<td>MD graduation lunch</td>
<td>Lunch with Nency</td>
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<td>IPE activity – lecture &amp; seminar for the 3rd project.</td>
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<td>14:00 - 15:00</td>
<td>IPE workshop with the IPE champions.</td>
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<td>Meeting with the nursing school</td>
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<td>16:00 - 17:00</td>
<td>MD graduation ceremony</td>
<td>Dinner with Asher</td>
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<td>“Faculty day”</td>
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<td>17:00 - 18:00</td>
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Future projects
Other schools

- Pharmacy
- Social workers
Cooperation with the new simulation center

- Will allow the students to simulate working as a team treating a “patient” in real time scenarios.
- Will enhance the students understanding of the importance of IPE.
- Will allow the students to get feedback on their clinical and team work skills.
Other activities

- Values and dilemma discussion in the groups.
Clinical rounds

- IPE integrated in the clinical rounds.

- A meeting once a week, including students from the different disciplines, in which a clinical case from the department will be discussed and analyzed from different professional points of view.

- Students from various schools, and not just medical will be integrated into clinical teaching in the department.
Cooporation with the Soroka University Medical Center, Clalit Insurance.

- A pilot program.
Extra-curricular activity

- An evening meeting 3 times a year discussing case presentations from the IPE point of view.
“Bears Hospital”

- A project well established in the medical faculty, where students work with kindergarten children to reduce stress and anxiety around meeting with medical staff.

- IPE attitude.
Thank you!