

EXECUTIVE SUMMARY

REPORT

of the

***PRESIDENT'S COMMITTEE
TO ELUCIDATE WAYS AND MEANS
TO OPTIMIZE
COLLABORATIVE/INTERPROFESSIONAL
EDUCATION AND RESEARCH AMONG THE
HEALTH PROFESSIONS IN
MEMORIAL UNIVERSITY OF NEWFOUNDLAND***

***Submitted to the President
Memorial University of Newfoundland***

May 31, 2006

INTRODUCTION AND FOCUS

President Meisen initiated this project in November 2005, in response to the 2005 release of a White Paper on Public Post-Secondary Education by the Government of Newfoundland and Labrador. To quote from the White Paper, *Foundation for Success*, “because today’s health and community services system involves many disciplines, a collaborative and inter-disciplinary approach is essential”.

The initiative relates directly to the education and training of health and community service professionals and others who will be needed to implement the Government’s strategy to make primary health care the central focus of the delivery of health and community services in Newfoundland and Labrador.

The focus will promote a team-based interprofessional approach in which physicians, nurses, pharmacists, social workers, other health and community service professionals and technical personnel will collaborate in the provision of patient-centered care and, simultaneously, rebalance health care services with wellness strategies to enhance the health status of the population and the ability of communities to support their residents’ health and well-being.

BETTER PRIMARY HEALTH THROUGH TEAMWORK

The benefits of collaborative/interprofessional health professional education and research are highlighted. While a variety of initiatives are either in place or being developed at Memorial and other universities throughout Canada and elsewhere, it is fair to say that nowhere is interprofessional health education and training being done as well as it should or needs be. The report has reviewed the literature, discussed some of the internal and external barriers to change and relied on Memorial’s Centre for Collaborative Health Professional Education (CCHPE) for information pertinent to attitudes toward interprofessional education among faculty, students and staff.

MEETING THE CHALLENGE

Making the changes necessary in the current post-secondary educational paradigm is a real challenge! The new paradigm must continue to ensure that all health professionals retain their high degree of competence and individual professional identities while also developing in them the capacity to work happily and productively together, knowledgeable about and confident in one another’s contributions to each health and community service team’s overarching responsibility to the people and population it serves.

REACHING THE OBJECTIVE

The objective is to prepare new graduates optimally for interprofessional collaborative practice, especially in primary health teams. To achieve this objective, the curricula and *modus operandi* of the participating professional Faculty and Schools in Memorial University must be even more oriented than they are now to incorporate the skills and practices of teamwork into the academic education and practice-based environments.

THE STRATEGIC PLAN

The report references several factors pointing to the fact that both Memorial University and the Province are particularly well suited to play a leading role in Canada and internationally in the development and application of interprofessional education and research.

Mission

To produce, primarily for the people of Newfoundland and Labrador:

- highly educated graduates, comfortable and experienced in working together, who will create and staff collaborative teams of health and community service professionals
- new knowledge, skills and attitudes that transcend traditional disciplinary and professional boundaries, derived from collaborative research and interprofessional education and practice focused on health, healthy living, and healthy communities
- exemplary practice models by which teams of health and community service professionals provide a range of services to communities and the individuals and families within them

Overall Goal

To produce graduates with up-to-date knowledge, skills, and attitudes derived from collaborative interprofessional research and education, who have practice experience in and are committed to working together in the teams required to provide the spectrum of professional services and programs needed by healthy communities to support the good health and healthy living of the individuals and families within them.

The Proposed Result

1. A Faculty and Schools collaboratively offering programs of professional study in medicine, nursing, pharmacy, social work, and human kinetics and

recreation (and others, such as clinical psychology, that may be developed or incorporated) in Memorial University, together with:

A collaborative interprofessional program of education and research that will feature:

2. At its core, practice experience in model environments representative of the people and communities of Newfoundland and Labrador. There, all students in the participating professional programs and medical residents will be mentored by qualified health and community service professionals working together in teams to provide health services to individuals and programs to communities in support of healthy living and healthy communities
3. Curriculum elements (modules, courses, and programs) to prepare students optimally in all the participating health and related community service professions to derive the greatest possible benefit from their collaborative practice experiences.
4. A non-hierarchical environment of “learning together” in which students in the participating professional programs will learn from one another:
 - the value of collaborative interprofessional contributions and inter-dependencies in the provision of services and programs both to individuals and to communities and
 - knowledge of and respect for the particular competencies of each profession
5. An environment that draws together students, professional staff, faculty members and health and community service professionals and facilitates their engagement in basic and applied collaborative interprofessional research.

Some Challenges (Generic and not necessarily Memorial specific)

- Lack of funding to review curriculum and teaching methods and of the resources required to make needed changes
- Overly crowded curricula and competing demands
- The lack of an evidence base assessing the impact of changes in teaching methods or curriculum
- No coordinated oversight across the continuum of education, and fragmented responsibilities for undergraduate and graduate education
- Little integration across oversight processes, including accreditation, licensing, and certification
- Unsupportive culture and norms in health professions education
- Too much emphasis on research and patient care in many academic settings, with little reward for teaching
- Silo structures and long-standing disciplinary boundaries among and across the professions

- Insufficient channels for sharing information and best practices
- A lack of faculty and of faculty development to ensure that faculty members will be available at training sites and able to teach students new competencies effectively
- A shortage of visionary leaders

Another challenge is:

- The potential of health and health care to overshadow other important social issues and determinants of individual and community health like justice, poverty, social housing, physical education, sport, etc., especially in the community service profession

Memorial and Provincial Specific Challenges

- Expanding the number of sites available to provide students and medical residents with appropriate interprofessional team practice experience
- Base and Capital funding for student placement, transportation, and model site expansion.
- Base funding for the establishment, operation and further development of the collaborative interprofessional program
- Capital funding to build and equip one or more facilities to accommodate the collaborative interprofessional program.

Proposed Academic/Administrative Structure

Two basic “structural” issues have been considered related to the development and delivery of an effective program of education and research that meets the mission, goal, and challenges.

- The academic organization necessary to lead and support decision-making related to interprofessional (as opposed to intra-professional) education and research. This extends to composition of the curriculum, program coherence, cross-listing of courses with the participating Faculty and Schools, evaluation of student and faculty performance, etc. – all those academic matters that fall under the purview of Faculty Councils under the final authority of the Senate. One of the keys to success in collaborative health professional education will be to differentiate between educational objectives and the competencies they address that are:
 - Profession-specific and must be taught to students in the profession concerned by faculty members from within that professional Faculty/School
 - Generic to all participating professions (e.g. good communication and interviewing skills, ethical standards, information management, structure of the health system, history of health and social services, etc.) and

- Designed to inculcate in all students, attitudes, skills and knowledge that reinforce mutual respect and teamwork. This latter category could be taught to all professional students by faculty members from any participating Faculty/School and credited through the use of cross-listed courses and modules.

The new academic structure proposed (see recommendation) is also necessary to support the expansion of interprofessional research, the continued development of which would certainly benefit from strong academic and administrative encouragement, especially from “seeding” with start-up funds and an environment that fosters close collaboration. The University, however, must formally and practically recognize such research (and teaching) as equally valuable to career progression as work published in recognized discipline journals.

- The leadership/administrative structure necessary to “champion” and manage the development of interprofessional education and research. It is also important to put in place a structure capable of carrying responsibility for those financial/administrative matters associated with the management of any academic enterprise – those matters normally within the purview of Deans and Directors, as delegated to them by the Vice-President (Academic).

Recommendation

The report recommends the establishment of a College of Interprofessional Health and Community Services led by a Principal who reports directly to the Vice-President (Academic)

The College Council will be all those faculty who teach in the collaborative interprofessional education program and/or conduct relevant research in the field; faculty from participating Faculties and Schools who hold joint or cross appointments to the College; Deans and Directors of participating Faculties and Schools.

The College Council, like other Faculty and School Councils, will report through the Principal to the University’s Senate.

The College would also establish a Community Advisory Committee, to include community members, health and community service representatives and Government representatives.

The Principal and members of the College would be supported by a staff that would provide the necessary administrative and related services.

COMMITTEE MEMBERSHIP

Dr. Duncan Sinclair, Retired Vice-Principal (Health Sciences) and Dean of Medicine, Queen's University

Dr. Shelly Birnie-Lefcovitch, Director, School of Social Work

Dr. Mary Bluechardt, Director, School of Human Kinetics and Recreation

Sr. Elizabeth Davis, former C.E.O., St. John's Health Corporation

Dr. Linda Hensman, Director, School of Pharmacy

Dr. Sandra LeFort, Director, School of Nursing

Dr. Wayne Ludlow (Facilitator and Vice-Chair), former Professor of Education and Dean, Student Affairs and Services

Dr. James Rourke, Dean, Faculty of Medicine

Dr. Shirley Solberg; School of Nursing

Dr. Roy West, Faculty of Medicine

Dr. Robert Miller, Chair, Discipline of Family Medicine (Alternate for Dr. Rourke)

Dr. Jim Connor, Associate Dean, Community Health and Humanities (Alternate for Dr. West)