

Interprofessional Education Course Introduction

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Outline

- Course Background
- Team Based Learning
- Interprofessional education
- Interprofessional Collaboration
- Course Logistics

What is Patient Safety?

- The main emphasis of the course!
- Definition: The **prevention** of errors and adverse effects to patients.
- While health care has become
 - more effective
 - Yet!
 - more **complex**, with greater use of new technologies, medicines and treatments.

Rationale

Why Patient Safety?

- Patient safety is not specific to one health profession
 - All health professional learning includes patient safety competencies.

What We Aim For...

- To satisfy the demand for a single coordinated approach that is
 - **Systems**-based
 - **Team**-dependent

Main Reference

Patient Safety Curriculum Guide Multi-professional Edition



<http://www.who.int/patientsafety/education/curriculum/tools-download/en/>

Team Based Learning



Team based learning

- A form of learning that strategically organizes students into permanent groups for the term. It consists of three Phases:
- Phase 1: student pre-class preparation, such as a reading assignment and viewing recorded lecture

Team based learning

- Phase 2: begins in class with students taking individual and team readiness-assurance tests (iRATs and tRATs)
 - Taking a short test that students complete as individuals iRAT
 - Retaking the **same test** again as a team after coming to consensus on answers tRAT

Team based learning

- Phase 3: students work in learning teams to
 - Apply course content to real-world problems
 - Participate in discussions within & among groups.



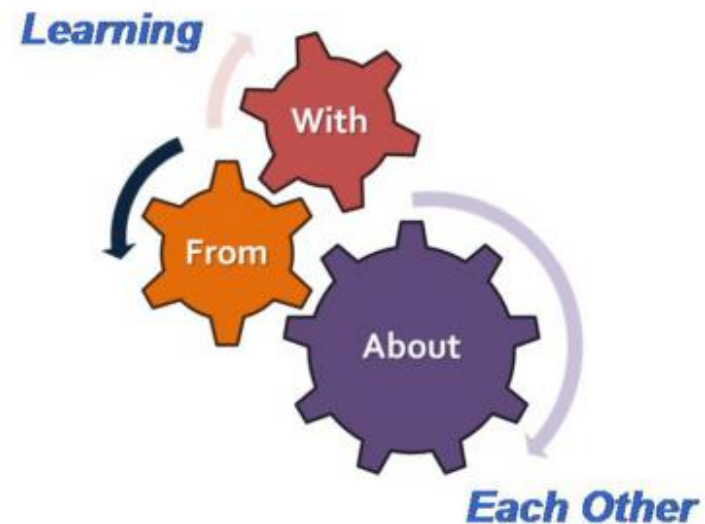
Team based learning

- Benefits
 - Higher volume of immediate feedback
 - Increased content comprehension
 - Improved communication skills
 - Improved exam scores
- Challenges
 - Students may be used to competitive learning

Interprofessional Education

What is Interprofessional education? *

- Educators and learners from 2 or more health professions jointly create and foster a collaborative learning environment.
- Students from two or more professions learn
 - **About** each other
 - **From** each other
 - **With** each other

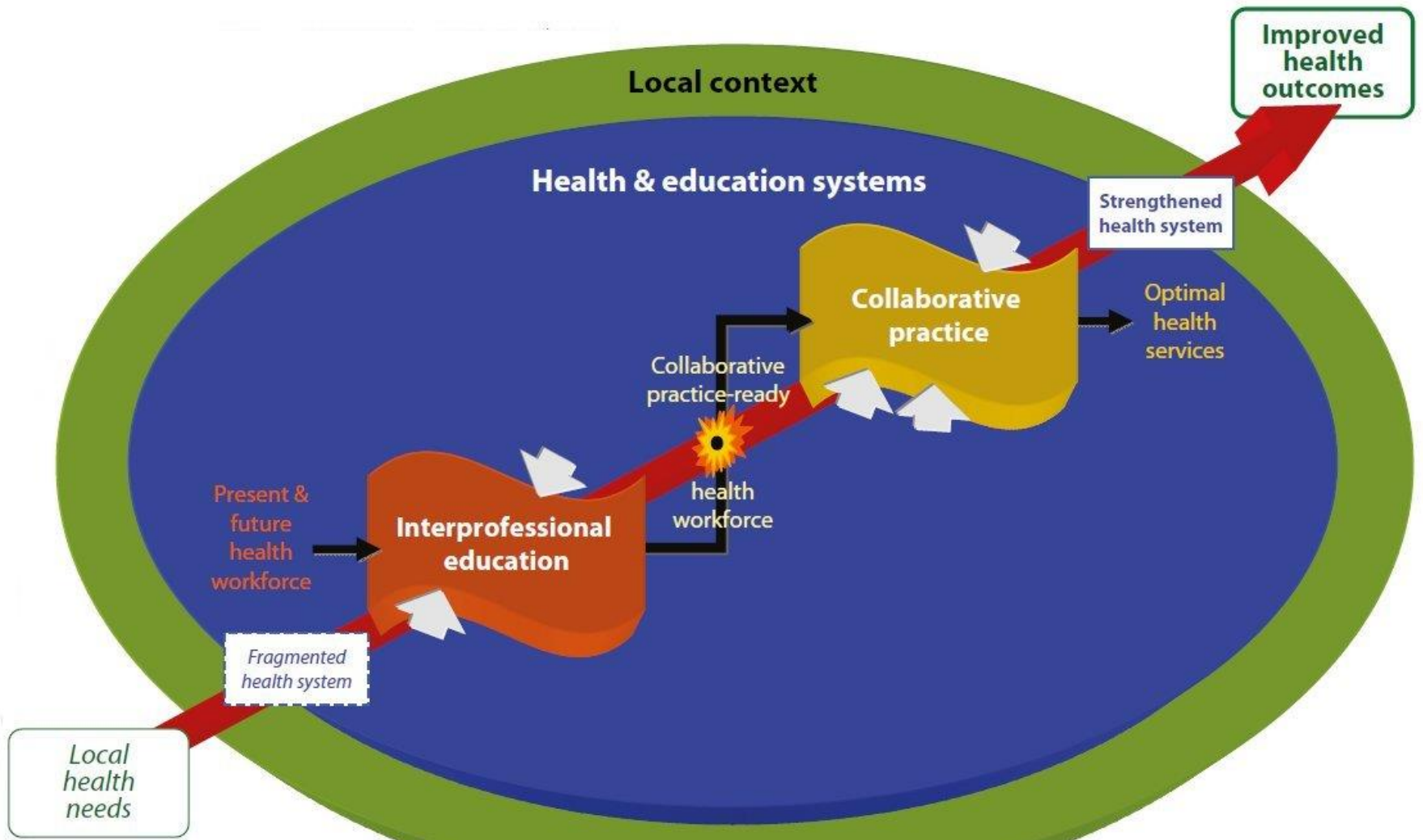


What is Interprofessional education?*

- Aims to enable effective collaborations and improve patients' health outcomes
- Common educational themes include:
 - Ethics
 - Evidence-based medicine
 - Patient safety

*Therese I. Poirier and Miranda Wilhelm (2013). Interprofessional Education: Fad or Imperative. *American Journal of Pharmaceutical Education*: Volume 77, Issue 4, Article 68.

Health and Education Systems (WHO, 2010)



IPE and IPP

Two primary areas:

(1) Pre-licensure- Interprofessional Education IPE

- Students

(2) Post-licensure- Interprofessional Practice IPP

- Ongoing professional development
- Usually Carried on at healthcare institutions

Benefits

- A positive change in perceptions and attitudes
- A positive change in knowledge and skills necessary for collaboration

Interprofessional Collaboration

Collaborative Practice

According to WHO:

“Collaborative practice happens when **multiple** health workers from **different** professional backgrounds work together with patients, families, carers and communities to deliver the highest quality of care across settings”

WHPA* Statement On Interprofessional Collaborative Practice

Effective interprofessional collaborative practice

(ICP) can lead to:

- Coordinated and safe health system
- Efficient use of resources
- Increased job satisfaction, with reduced stress.

***WHPA: World Health Professions Alliance**

Building Trust: The Cornerstone to Successful Collaborative Arrangements

*In trusting relationships both parties:

- Sought input from one another
- Allowed each other to do their jobs without unnecessary oversight
- Openly discussed success and failure and learned from one another

*Tallia AF, Stange KC, McDonald RR. Understanding organizational design of primary care practice. *Journal of Healthcare Management* 48: 45–59, 2003.

Teamwork

- Teams comprising multiple disciplines and levels of workers should meet regularly to
 - Plan
 - Deliberate
 - Communicate
 - Evaluate their work
 - Evidence and Data!!

Teams in Health Care

- Failed communication and incongruent teamwork
 - 80% of harmful errors reported to The Joint Commission had poor communication as a root cause
- With highly functional teams
 - Efficiency, safety, and clinical outcomes are improved
 - Hospital stays and costs are decreased



Together
Everyone
Achieves
More

Joint Commission on Accreditation of Healthcare Organizations. Root causes of sentinel events. Available at:

www.jointcommission.org/SentinelEvents/Statistics/

Aviation Industry as an Example

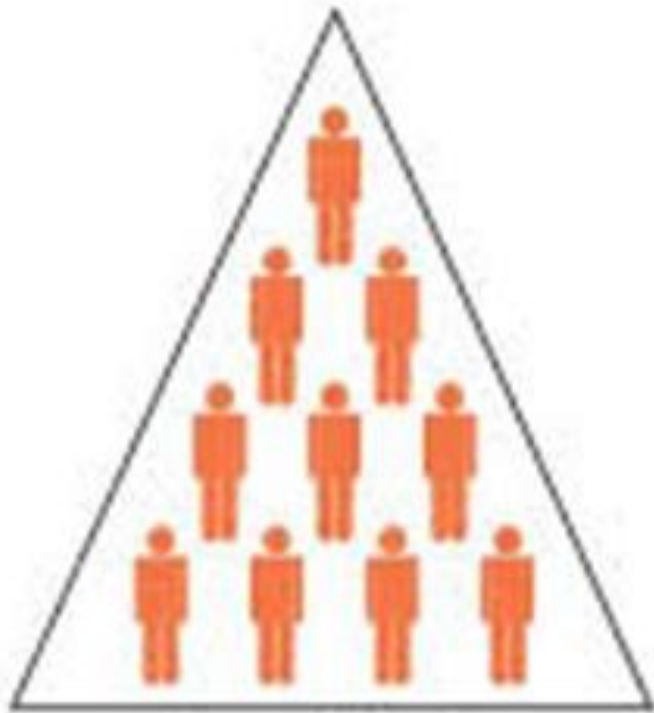


Aviation vs Healthcare

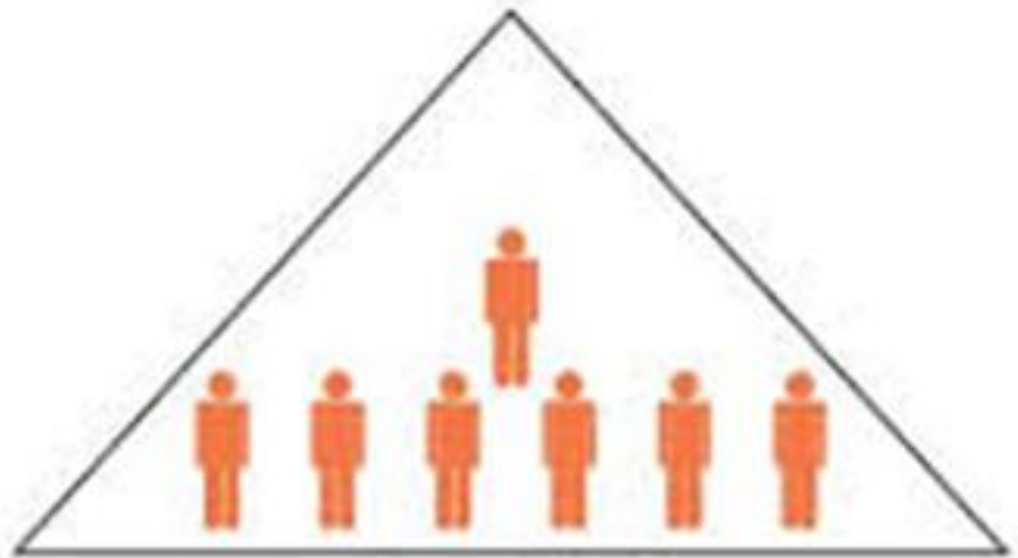
Attitudes of superior pilots

- Aware of personal limitations
- Recognize the need to verbalize plans
- Encourage crew members to question decisions
- Understand the need to train crew members
- Sensitive to the personal problems of crew

Vertical vs Flat Hierarchy



Organisation A



Organisation B

Barriers to Teamwork in Health Care: Hierarchical Structure

- Survey of surgical staffs and airline crews showed
- 94% of airline crews preferred flat hierarchies and questioning by subordinates

While



- 59% of attending surgeons preferred flat hierarchies and questioning by junior team members



Working with Colleagues

- Approach people as neither inferior nor superior to you!
- Validate others for their talents
 - Be generous with praise
 - Give credit to others for their contributions, ideas and experience

Working with Colleagues

- Believe that what others think matters;
 - Give them the chance to explain their perspectives
 - Actively listen in order to understand them.
- Benefit of the Doubt
 - Treat people as trustworthy

Course Logistics



Schedule

- Lecture:
 - Friday 8:00 - 10:00 am

What we will expect from you

- Be in the room before the session starts.
- Text messaging and e-mailing in class is prohibited.
- Do not miss a class!

Participation

- How much effort you put in the discussion
- How well do you listen to what others in the class have to say
- The extent of providing a rationale for positions you take

Participation

- How you build on what already has been said during the discussion
 - to move the level of discussion forward
- How relevant are the points you make relevant to the topic being discussed
- Please check the **participation rubric** which will be posted on i-connect for more details

Request For Appropriate Accommodations

- If you have, or think you may have, a disability (e.g., mental health, attentional, learning, chronic health, sensory, or physical),
- please contact one of the coordinators to arrange a confidential discussion to review how the accommodations can be applied in the course.

Schedule

Date	Group	Session Title
12/2	A&B	Course Introduction
19/2	A	Team-building
26/2	B	Team-building
04/3	A&B	Lecture Introduction to Patient Safety
11/3	A	TBL Medication safety
18/3	B	TBL Medication safety
08/4	A	TBL Understanding and managing clinical risk
15/4	B	TBL Understanding and managing clinical risk
22/4	Groups ()	-
6/5	Groups ()	
13/5	Groups ()	
20/5	Groups ()	
27/5	A&B	Closing

Assessment

- Attendance : 20%
 - If you are present at 8AM you get 4 %
 - If you arrive at 8:00-8:15 you get 2%
 - If you arrive after 8:15 you get no points
 - You get the best 5 out of 6 grades!

Assessment

- Attendance : 20%
- Team Based Learning Activities in Lab:60%
 - Session 1 IRAT 5%, TRAT 5% , Problem Solution 10% ,and Participation:10%
 - Session 2 IRAT 5%, TRAT 5% , Problem Solution 10% ,and Participation:10%
- Case Based Learning: 20%
 - One Session Problem Solution 10% ,and Participation:10%

Thank you for listening
Questions!

Next Time
Team Building with
Dr Mohamed Issa