

Interprofessional Education

Middle Years IPE Common Learning

Student Study Book



Themes:

Professional Communication Pathways,
Patient Journeys,
Professional Practices & Team Working

Foreword

The following words are from Professor Fowler, Professor Weinberg, and Professor Glen, the Strategic Alliance Executive.


Dear Student,

When you enter the health-based workforce of the future you will be looking after people with complex needs. They will require your skills and knowledge and the skills and knowledge of other healthcare professionals.

At City University and Queen Mary we train a wide variety of health and social care professionals. The Interprofessional Common Learning Programme is one of our exciting developments, ensuring that our students experience interprofessional working and learning whatever their health and social care discipline. The programme has been designed specifically with your future interprofessional needs and interests in mind, and aims to develop you as an effective participant within the ever-changing environment of health and social care; able to work effectively with those other professionals.

Alongside its educational purposes, we very much hope that you enjoy participating in the programme and adding these extra interprofessional dimensions to your skills and lives.

Regards,



Prof. Chris Fowler, Prof. Julius Weinberg and Prof. Sally Glen

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Welcome

We, the IPE team, would like to welcome you to the Middle Years Common Learning Study Book. The study book contains all the information that you will need to complete the required tasks for this element of your interprofessional learning. We hope that you will find them both stimulating and enjoyable.

It is our estimation that the total time commitment to complete the study book will be approximately 5 – 6 hours.

If at any point throughout working with this study book you feel you need more information or support, please do not hesitate to get in contact with us;

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For information: Please note that throughout this study book we will be referring to health and social care, and healthcare and social care professionals. We will abbreviate this to 'HSC' or 'HSCP'.

Introduction

What is Interprofessional Education?

Interprofessional education, or IPE, is a relatively new concept, having only been around in the UK since the early 1990's, however, teams and teamworking have been an integral part of healthcare activities since their inception. 'Interprofessional education/training describes those occasions when two or more professions learn with, from and about each other to improve collaboration and the quality of care'ⁱ (Freeth *et al*, 2005). Essentially, it aims to advance and enhance the educational practices of HSCP.

What is IPE for?

Hugh Barr, a prominent commentator in the IPE field, noted that 'interprofessional education was conceived as a way of overcoming ignorance and prejudice amongst healthcare and social care professions'ⁱⁱ. The general view is that shared learning encourages the professions to work more effectively together and that this should improve the quality of care for patients. Barr went on to note that 'by learning together the professions ... would understand each other better, valuing what each brought to collaborative practice whilst setting aside negative stereotypes'.

Interprofessional education as a desired part of training has now become embedded in professional healthcare documentation. For example, the Department of Health (DoH) asks for training to be 'genuinely multi-professional' to promote: 'teamwork; partnership and collaboration between professionals, agencies and patients; skill mix and flexible working; opportunities to switch training pathways [and to create] new types of workers'ⁱⁱⁱ. The General Medical Council (GMC) in its document *Tomorrow's Doctors*^{iv}, now requires all undergraduate curricula to prepare students for team working. Other HSC professions, through their own practice documents, are asking pre-registration/undergraduate curricula to reflect the need for IPE.

Aim

Our aim for IPE, at undergraduate/pre-registration level, is to produce HSC practitioners who not only understand the roles and responsibilities of different professionals in the HSC team, but are also able to work effectively as members of multidisciplinary teams. The purpose of the experience is to introduce you to interprofessional thinking and also an understanding of the professions' roles from a patient's or client's perspective. It is to help you to gain an objective view of the working environment and draw insights from the practices you witness that will improve your personal practices.

We hope that we have created something that meets not only the professions' needs, but most importantly your own. We hope that we can help you prepare for the careers that you have chosen, by giving you some of the tools and understanding to manage one of the central elements of being effective health and social care professionals. We also hope that this interprofessional work will enhance your practice experiences – and be enjoyable!

What is the Middle Years Common Learning Experience?

The programme typically occurs in the middle years of training for all the different disciplines, for example in year two of the Nursing programmes and year three of the MBBS course. The learning experience will take place in your practice/placement environment and will involve HSC students from many different professions. The programme contains three elements:

Process

- **Part 1:** This is a facilitated group session which will be conducted in your work placement with students from other disciplines. It is designed to introduce you to interprofessional working, the study book and the tasks within it.

During this session you will be paired up, if possible with someone from another discipline at the same placement, so that you can support each other as you do the tasks – by email, phone or direct contact. Each pair will then be expected to come back to a debriefing session together.

- **Part 2:** This is where you carry out the tasks within your placement, as directed by this study book.
- **Part 3:** The final element is another facilitated session, again multidisciplinary, to discuss your observations and conclusions from the information you collected. You will be asked to share some of your reflections with the group, discuss any surprises you found and any of your perceptions that have changed as a result of the exercises.

Task Objectives

In summary, the overall process involves collecting and considering three perspectives of an interprofessional context (Fig. 1).

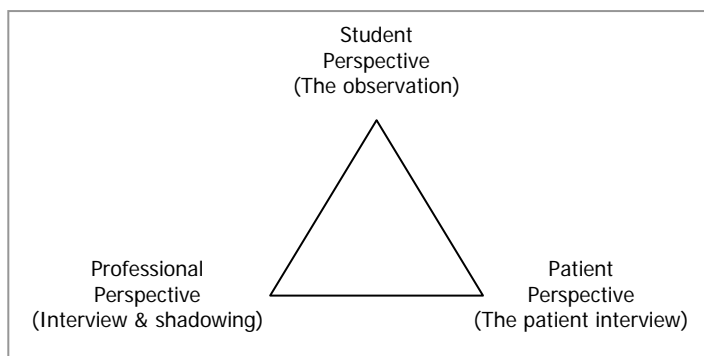


Fig. 1

Task 1 – Observation:

The purpose is to start to notice what is *actually* going on around you rather than what you presume is going on, to see how HSCP communicate in the professional setting and any effect this might have on colleagues and/or patients, clients, families or carers.

Task 2 – Patient/Client Interview:

The purpose is to get an insider's perspective – what is it like to be a patient/client, and what do you see from the other side (i.e. receiving care rather than giving it)?

Task 3 – Interviewing & Shadowing:

The purpose is to get direct insight into the roles of other professionals, and also to share your training pathway with a peer, on a different course, to compare and contrast, and learn together.

Learning outcomes

Most of you will find that the following learning outcomes will be part of your assessments relating to the interprofessional working and learning elements of your specific professional course. They should be held in your practice portfolios.

By the end of this Common Learning experience you will be able to: -

- Discuss, from data that you have personally collected, uni-professional and interprofessional perspectives and roles and their contribution to the management of the patient's/client's care.
- Demonstrate your ability to work collaboratively, to learn from and with students from other professions, and also patients/clients.
- Analyse and reflect on the experience of interprofessional teams and how this influences collaborative working in care management.

The completed study book will be put into your practice portfolios.

Your responsibilities

You must:

- Take an active part in the discussions and in undertaking the various activities
- Respect and show value for the viewpoints and perspectives of other participants
- Ensure that you undertake and complete all the activities and write them up for presentation at the end of the course.

The role of the facilitator in parts 1 & 3

To help you achieve these aims and learning outcomes you will have a facilitator for parts 1 and 3. All our facilitators are trained to work on this IPE programme. We hope that you will be able to use their experiences to enhance and extend your understanding of interprofessional working and learning and that the support you receive will be both challenging and encouraging.

Their basic tasks are to:

- Commit to facilitating your group at the required time and place.
- Respect your stage of professional development.
- Encourage you to extend your critical thinking skills during the group process.

Assessment elements

As detailed above, this study book will become part of your practice portfolio. To demonstrate that you have managed the tasks satisfactorily you will need to complete the following:

- Full participation in both facilitated sessions (parts 1 and 3)
- Attendance at the placement area and completing the tasks
- Completion of all elements
- Obtaining all the necessary signatures verifying that you have sought and gained permission from all relevant individuals (see pages 12-13 for the specific people from whom you need to gain permission).

Other information

As you will all be aware, working in the placement environment will require you to follow various professional codes, and we have listed below some of the key points. We expect you to be considerate and to fit in with the specific context of your placement. To that end, it is always worth taking a minute or two, at the start of the experience, to familiarise yourself with the specific needs of your placement area.

Please note:

- You must wear appropriate identification at all times.
- You must dress appropriately and your mobile phone must be switched off.
- On arrival at clinical/placement areas you must report to the member of staff in charge.
- You must respect confidentiality at all times and work within the Data Protection Act^v in relation to electronically stored data.
- You must adhere to the Health and Safety at Work Act^{vi}.
- You must carry out duties and responsibilities with regard to the organisation's equal opportunities policy and anti-discriminatory policy (e.g. Barts and The London Hospital^{vii}).
- You must be mindful of any specific regulations or issues within the placement setting.

If you witness any form of care or practice that you have concerns about, it is your duty to report your observation to someone more senior. Each Trust has clinical governance guidelines, including codes of practice, that you may want to view on the Trust's website. When you report your concerns, please note who you reported to and the time/date.

You can always contact the IPE Office for support or advice:

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Your notes (you may like to write down the contact details of key people in your placement area here):

Required Signatures

As you work through the study book you will need to have these signature boxes filled. We have placed this page at the front of the tasks section to remind you of whom you need to contact to gain permission and proof of attendance.

Facilitator for Introduction

Name (please print)

Signature

Date

Placement supervisor

Name (please print)

Signature

Date

Facilitator for Debrief

Name (please print)

Signature

Date

TASK 1: Observation. *Gain permission as appropriate to your placement.

*Ward manager

Name (please print)

Signature

Date

***Attachment professional in 1 to 1 situation (e.g. health visitor)**

Name (please print)

Signature

Date

***Client under observation in 1 to 1 situation (e.g. home visits)**

Please collect initials only.

Initials

Date

TASK 2: Patient Interview. Please collect initials only.

Patient/client for interview

Initials

Date

TASK 3: Interviewing and Shadowing.

Professional for interview/shadowing

Name (please print)

Signature

Date

Peer for interview

Name (please print)

Signature

Date

The Study Book Tasks

Activity One

Professional Communication Pathways

Observing teams and teamwork

Activity Two

Patient Journeys

Patient/Client interview

Activity Three

Professional Practices & Team Working

Interviewing and shadowing healthcare professionals

Activity One

Professional Communication Pathways

Observing teams and teamwork

The purpose of the following observation activities in your IPE experience is to give you some tools to enhance your ability to 'notice' the professional environment that surrounds you and to write systematic accounts or narratives of these experiences. You will need to learn to 'tune in' to what's going on around you, perhaps noticing what *isn't* happening, as well as what is.

We realise that you may have done observation exercises in the past, but we would like you to revisit this skill with a more sophisticated approach.

The following quote is to give you some background to the thinking behind the purpose of these tasks:

"...any form of expertise involves noticing, but, whereas in the beginner's mind there are many possibilities, in the expert's there are few. The chiropractor cannot help noticing the backs out of alignment as people walk down the street... the family doctor notices symptoms in friends and colleagues; the pharmacist notices signs of distress both psychological and physical...; the architect notices structures behind the surfaces of buildings...and so it goes on. Expertise is sensitisation to notice..."^{viii} (Mason, J. (2002))

The activities that you record will provide you with a platform to reflect on – to think about what you have seen, and evaluate its significance. This will enable you to continue as Mason suggests (above), to 'sharpen your sensitivities'.

In this first task we are asking you simply to observe and record what is happening in the placement area that you are working in. The following information will give you the details you need to carry out this task.

Process

Locate yourself somewhere in the practice area where you can be unobtrusive but are able to observe what is taking place around you. Try to be in sight of two patients/clients and a staff area if possible. The aim is to enable yourself to view the usual professional interactions that happen in this practice area.

NB 1.

You will need to get permission for these activities from the ward manager or supervisor and to record the permission by their signing the appropriate box on pages 12-13.

NB 2.

As you will be observing people i.e. colleagues and patients/clients in a professional setting and making written notes, you must make sure that your work does not infringe on patient/client confidentiality nor breach the Data Protection Act.

Basically, in this situation, this requires you to anonymise people in your written accounts, meaning **you must not refer to anyone by their name**. However, you may refer to them as e.g. Patient 1, 2, 3 etc.

Likewise, with professional colleagues, you must take great care not to identify them further than their specific titles (e.g. Ward Sister, Health Visitor, PRHO, Consultant, Physiotherapist, Radiographer, Speech & Language Therapist, Social Worker, Teacher etc).

You may like to create a code for yourself to ease the observation note taking process and create a greater level of anonymity to your work.

NB 3.

You might need to explain to the people you are observing what you are doing. We suggest that you ask your placement manager to support you in this. Explain that the task requires you to simply record any interactions that you see, during a set of three timed intervals. **You will be noting 'who has spoken to whom', and will not be recording what they are saying.** You can say that it is part of a series of activities to be completed in the workplace, where you are learning about professional communication pathways. If the people you are observing would like, share with them what you have recorded after you have done your observation.

Note taking: First period

[PLEASE USE THE SHEETS PROVIDED IN THIS BOOK FOR YOUR NOTES]

From your vantage point, for 5 to 7 minutes, write down who is talking to whom. Example: Staff nurse to patient - staff nurse to student nurse - patient to relative etc. Also make sure that you make a note of the time you start and the time you finish the observation.

From these observations draw up a list of the different professions who were involved and *design a diagram that shows their interactions.*

Note taking: Second period

At another time in the day, and possibly from a different position, again write down who is talking to whom. This time the observation period should last for 10 minutes.

Draw another diagram to show these interactions.

Note taking: Third period

In this third observation, note not only who is talking to whom, but also roughly how long they are talking together. The observation period should be for 15 minutes.

Draw your interactions diagram and add your 'talk time' estimates.

Here is a list of thoughts to consider while undertaking the task

(NB they are not necessarily questions that must be answered, more a guide to what you are looking for):

- Who is present (and who could be, but is not)?
- Is it clear which profession they are from?
- Is one person doing all the talking or is it shared – and is that format appropriate?
- If appropriate, is the patient/client included in the conversations?
- Does the patient/client understand what's being said or does someone have to 'translate' for them afterwards?
- Do patients/clients seem happy?
- Are relatives/carers present? Are they involved in the conversation – and is that appropriate?

Reflective questions

How does what you observe make you feel?

Has anything been a surprise to you?

As a variation in the final observation period, you may like to analyse it in terms of the nature of the interactions taking place, and the roles played by the different people involved.

For example, observe the types of verbal and non-verbal communication behaviours used by each person, such as:

- ~ Greetings/farewells and other social interactions e.g. joking, acknowledging, expressing sympathy
- ~ Asking for information/giving information
- ~ Asking opinion/giving opinion
- ~ Agreeing/disagreeing
- ~ Giving instructions
- ~ Nodding
- ~ Smiling/laughing
- ~ Facial expressions
- ~ Hand movements

For reflection: What do you think these might mean? E.g. Who is leading the interaction? Have you observed communication that you would describe as culturally specific?

Other communication elements may be conveyed not by the words used, but by their tone or volume. Did you notice any such examples in your observations?

Overall, what do you think you noticed? Were there patterns to the interactions, and were there clear pathways? Did you feel that people were communicating effectively, or not?

Additional information to collect

Once you are finished, put together another list that notes all the professions who could have been in the professional area that you are working in. You will need to check this list with someone who works in the professional environment to make sure that you have included everyone.

Summary of tasks:

Note taking 1st period, 5-7 minutes

Note taking 2nd period, 10 minutes

Note taking 3rd period, 15 minutes

Note who is talking to whom, this must include the patient/client. For the 3rd period, add in a length of time for communication.

Observation notes

Observation notes

Observation notes

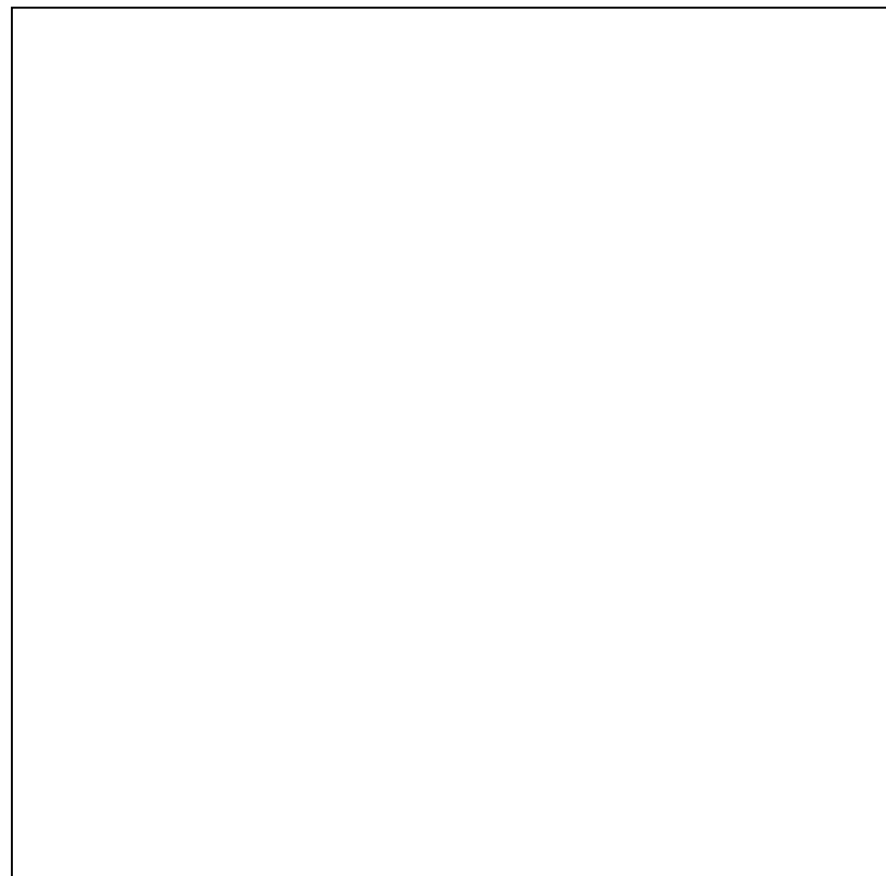
**Professions who could have been in the
area that you are working in:**

Reflections:

What have you learnt from witnessing and recording simple everyday practice based interactions? Was it what you expected - were there any surprises?

Write down two key points that this process has brought to your notice and, where possible, use the observations that you have collected to illustrate your points.

(150 words approx)



Reflections Continued...

Activity Two

Patient Journeys

Patient/client interview

In the second element of this programme you will be talking directly to patients/clients and trying to get their perspective of the health and social care world.

As you will be talking directly to someone who is a patient/client you will need to ask the person in charge of the professional area to give you guidance as to who might be suitable to interview.

Consent

Before you interview anyone you will need to gain their consent. To do this we suggest that you simply introduce yourself and explain what you are doing. For example: "As part of my interprofessional education project, I am interviewing patients/clients about how they come to be in this particular setting and what views they have of being there". You can also reassure them that they will remain anonymous. On the signatures sheet you will see that patients/clients only need initial the space. (Do not proceed if the patient does not wish to initial the box on page 13).

The Interview

The interview itself should last at least 15 minutes. It would be better if it were longer, but you do not want to tire or tax the patient/client so you will have to pay attention to their levels of fatigue as you are working with them. However, you will probably find that your patient/client is happy to talk to you for longer and this is fine.

In preparation of this interview you might find it helpful to make a list of the topics you need to cover as a memory aid when you speak to your interviewee. You will need to take written notes of the interview and, as before, you must be careful to anonymise your notes – remember, no ward or hospital names etc.

Some guidelines for approaching the interview:

- Take a brief history e.g. broad background information including age, occupation (if appropriate), reason for being in this health or social care setting
- Is this their first visit to this setting? Is it what they expected?
- Have they been in many times? If so, has the experience changed over the years?
- Which professions have been seeing them? (Do they know?)
- How does the patient/client feel about their experiences with the various professional groups?
- What do they think of the different HSCP who have seen them?
- Have they felt well informed of what's going on?
- Do they see teams working well together (or not)?
- Have they had the opportunity to talk to someone about any concerns they may have while being in this setting?
- Could they describe what it is like being a patient or client in this environment?

Reflective questions

How does what you have heard make you feel?

How does the patient/client's story relate to your own experiences within health and social care contexts?

It is important that throughout the interview you are mindful of patient's/client's sensitivities to their illness/special needs, and make sure that you are not intrusive with your questioning in your quest to 'get the information'. And, needless to say, at the end of the interview please make sure you thank the patient/client for their time. If you notice they are stressed or unhappy please do not continue, but thank them for their help and offer to return at another time, or interview someone else. You should also inform a supervisor of the situation.

Summary

Patient/Client interview – minimum of 15 minutes duration with written notes.

Your preparation:

Patient/Client interview notes

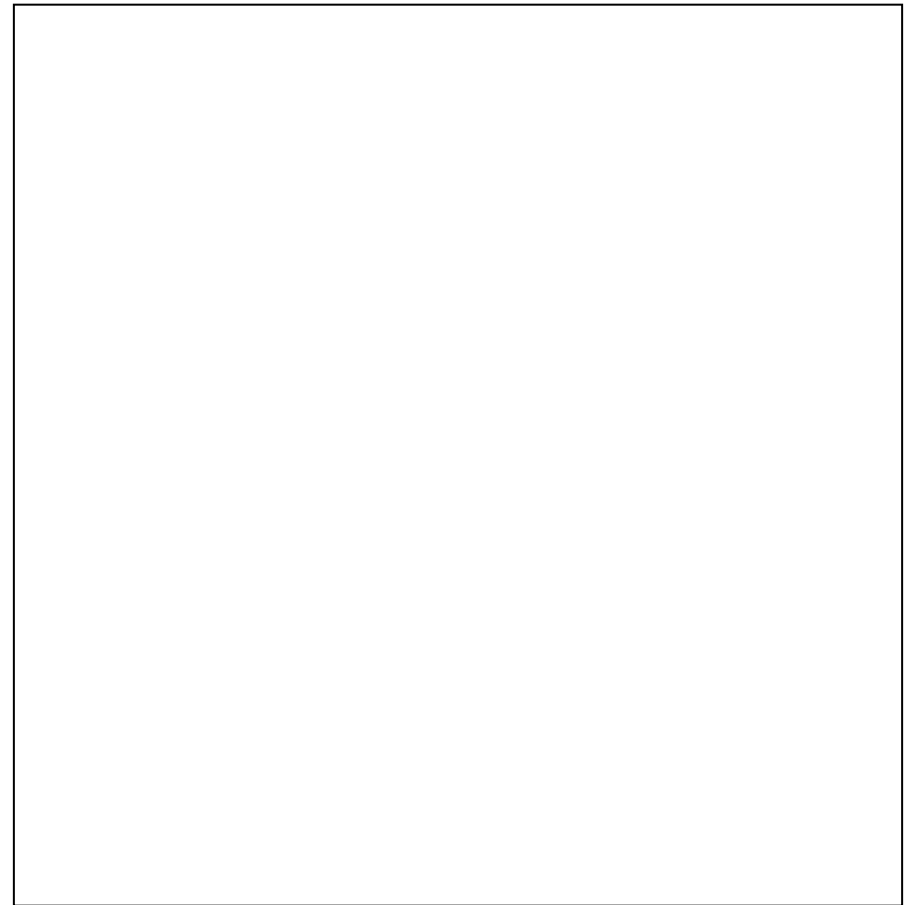
Patient/Client interview notes

Patient/Client interview notes

Reflections:

As before, what has this information revealed to you? Also, how did learning about this patient's/client's journey make you feel? Was it what you expected, were there any surprises?

From your notes, write two key points that were raised for you by this interview. Use your own examples to illustrate your work.

A large, empty rectangular box with a thin black border, intended for the student to write their reflections on the interview notes.

Reflections Continued...

Activity Three

Professional Practices & Team Working

Interviewing and shadowing peers and professionals

In the final element of the programme you will perform two interviews and shadow a member of staff. One interview will be with a professional member of the health or social care team. You will be finding out what they do, how they reached this stage of their career etc. The second interview will be with a student from a different discipline (not your own) – either someone who is currently within your placement, or someone that you can contact easily. You will be asking them similar questions and discussing their perceptions of their discipline.

In addition to these interviews, you will need to shadow your chosen HSCP, so you will need to ensure the person is happy to be involved in both ways.

Interviewing and shadowing a health or social care professional

Select someone from one of the professional groups mentioned in the patient/client interview. It would be best if you could talk to the staff that are caring for your patient/client, but this might not be possible and we have allowed for that in the exercise. Allow 30 minutes for the interview.

For the shadowing process, you will need to write observation notes as you follow your respondent around while they undertake their usual professional activities. We expect the shadowing to last for a minimum of 1 hour. Apart from the permission of the person you are shadowing you will also, if appropriate, need to obtain permission from the person in charge of you while you are on placement. Again these permissions must be entered into your study book.

The aim is for you to record a broad overview of their role and responsibilities as reflected in the work that you witness.

Interviewing a Peer

Again, from the patient's pathway if possible, find a student that represents one of the professions that has cared for them. You may wish to talk to someone who is at the same stage of training, or more senior to yourself; either is fine. If appropriate, you may also share your own experiences of training. With all of this, remember to record their stage in their programme, experience etc (whilst maintaining confidentiality). As previously, allow 30 minutes for the interview.

Guidelines of topics to cover in the interviews:

- To which professional group does the interviewee belong?
- What is their grade/level of study?
- Why did the person choose this profession?
- How did they get to this point in their career? (Training pathway)
- What are their main roles and responsibilities?
- Who do they spend most of their time with?
- Do they find it beneficial to meet with different HSCP?
- What do they think of multiprofessional working/interprofessional learning?

Reflective questions:

- Was the role as you saw it what you expected? Was it busier? More/less technical? Harder/easier than previously thought?
- Did you have perceptions about the person or role that were confirmed or changed by the exercise?
- Did the exercise affect how you might relate to people in this profession in the future?
- Did it increase or decrease your confidence to approach them?

Summary

HSCP interview – minimum 30 minutes. You will need to provide written notes on the interview. You will also need to shadow the person for a minimum of 1 hour and record their activities with written notes.

Student interview – minimum 30 minutes. Again written notes must be provided.

Health/social care professional interview notes

Health/social care professional interview notes

Health/social care professional interview notes

Shadowing notes

Shadowing notes

Peer interview notes

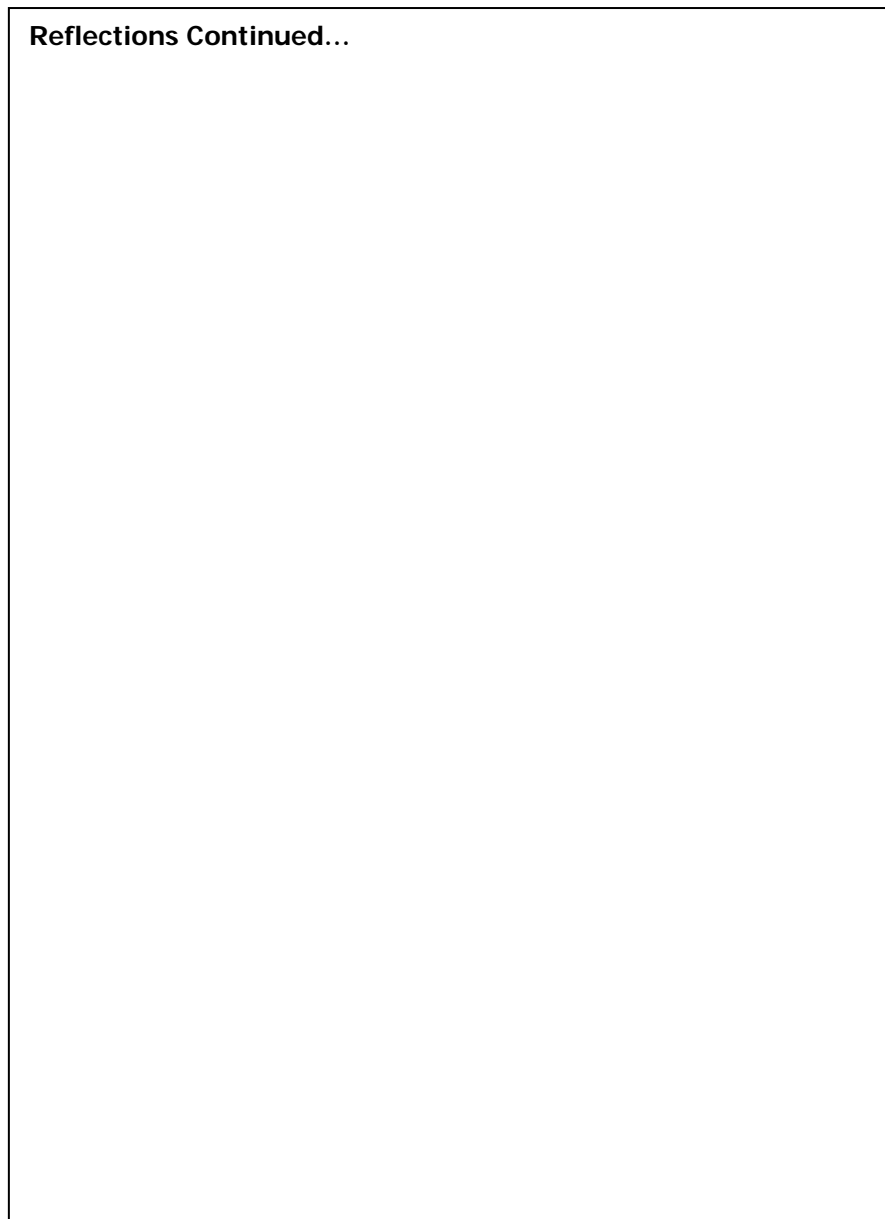
Peer interview notes

Reflections:

What did talking to peers and other professionals add to your understanding of their roles? From your notes, for each interviewee, select 3 key points about the person's role – 2 of which you would consider to be essential elements of their work and one that is something that you had not known about before talking to them. Also write a short piece on your shadowing exercise, focussing on how they communicated with colleagues and patients/clients, including which elements they managed particularly well and which elements you feel you learnt from specifically. Use your notes to support your comments.



Reflections Continued...



Reflections Continued...

Contributors and Acknowledgements

The IPE Office would like to thank the following people for their contribution to this study book and programme:

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- ^v Data Protection Act 1998: <http://www.opsi.gov.uk/acts/acts1998/19980029.htm> [10 Nov 05]
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