Canada & IPE/IPP/IPC Five Inevitable Questions Two Wicked Problems



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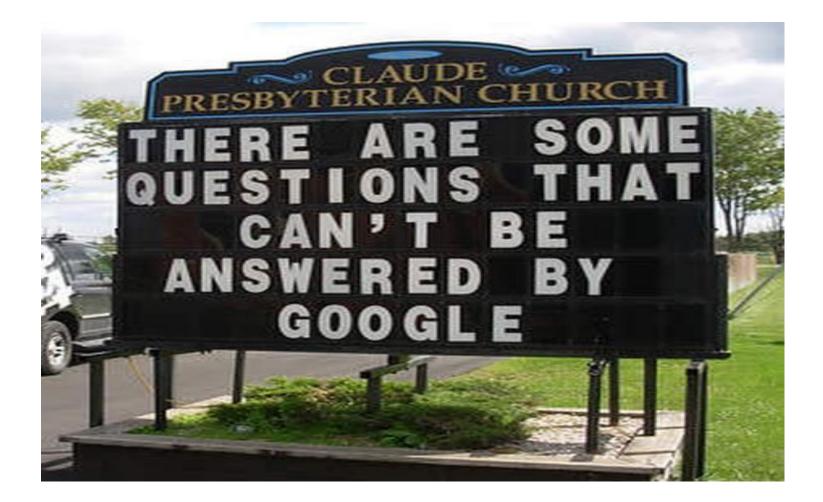


Why?

Need for *clear and coherent arguments* for IPE/IPP/IPC.

Need to understand that participants are both informants and champions.







Who?

Understanding new roles for: Faculty Students Staff Practice colleagues Senior administrators Patients/Clients





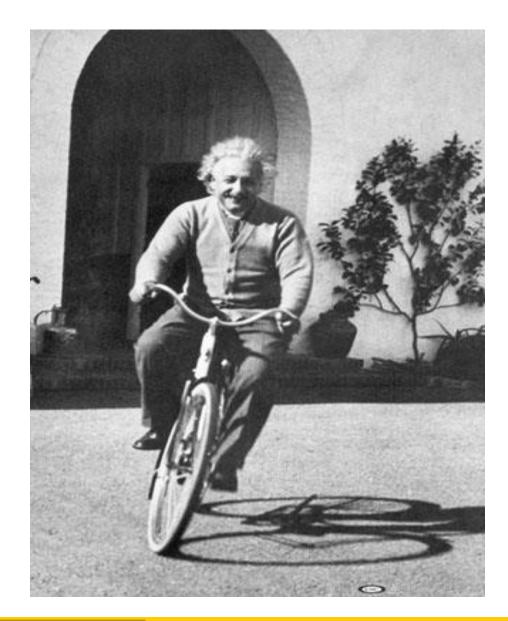


When?

Evidence for:ExposurePre-licensureImmersionPre-licensureMasteryPost-licensure, life-long learning... through informed consultation between
governments, campus, community – **and patients**.



Learning is like riding a bicycle-Stop peddling and you fall off





Where?

Theories & Models for: Campus based learning. Community based learning e.g. Primary care Tertiary Public & Preventative Health Health Promotion



Collaborative Care Model

Ongoing Staff Development and Mentorship

people

Coordinator to plan and monitor care Flexibility to meet patient needs Value support areas as key Team determined by patient needs Strengthened role of allied health Provincial, standardized roles at full scope of practice Work done by the most appropriate provider Increased focus on workplace health

DIOCESS Integrate evidence into practice

Streamline processes Empowering patients & families Ensure safe, quality services Working optimally as a team Clear, integrated discharge plans Customer-focus Partnerships through continuum of care

Patient and Family

Strong and Effective Communications

Sharing with academic / research communities Evidence-informed practice and knowledge transfer Balance privacy needs with care requirements Support tools for information-gathering Quick & easy tools provide timely information Province-wide plan for information roll-out Metrics and performance tools Ongoing education for collaborators **information**

Enable personalization with supports Access to technology that best supports care Change management supports "Push" information to providers Strengthened communications Evaluative frameworks Province-wide approach

Collaboration Across the Continuum Committed and Supportive Leadership



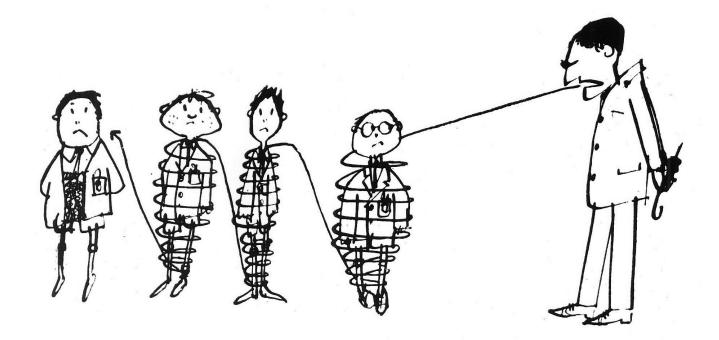
How?

Operationalizing the definition: "learning with, from and about; collaboration; quality of care"

- Knowledge
- Skills
- Attitude
- Behaviour?
- ... and evaluation at all stages



A poor way to learn about team functioning





What?

Politics and Policy Regulation Competences Accreditation

Legislation



Legislation for IPE

On April 10, 2008, the British Columbia Minister of Health introduced the Health Professions Regulatory Reform Act, Section 10 (f) introduces a change to the bylaws of all Regulatory Colleges in B.C. that will require each College:

"to promote and enhance the interprofessional collaborative practice between its registrants and persons practicing another health profession."



Two Wicked Problems*

1) What is the policy coherence between the education sector and the health sector?

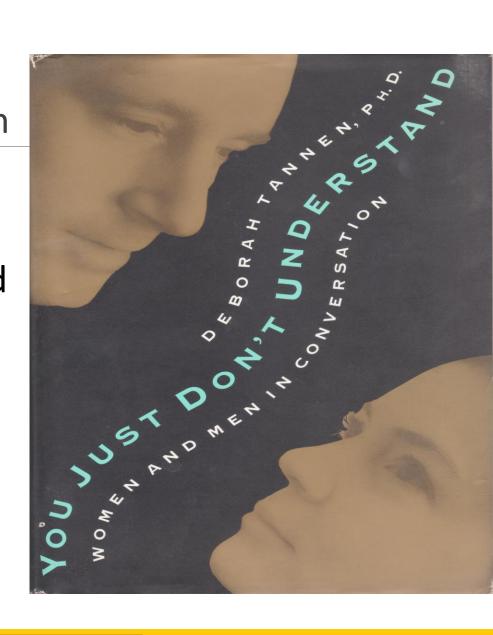
2) What is the return on investment (ROI) for IPE/IPP/IPC?

"Wicked problems are difficult or impossible to solve. Their solutions depend on incomplete, contradictory and changing requirements that are often difficult to recognize. And they are confounded by complex interdependencies between actors and agents." (*Rittel and Webber (1973))



"Interprofessional" -Establishing the Definition The Soundbite Problem

The struggle to be heard takes precedence over the accuracy of what is being said





IPE/IPP/IPC Almost There, Not There Yet





Centre on Health Workforce **Planning & Research**