

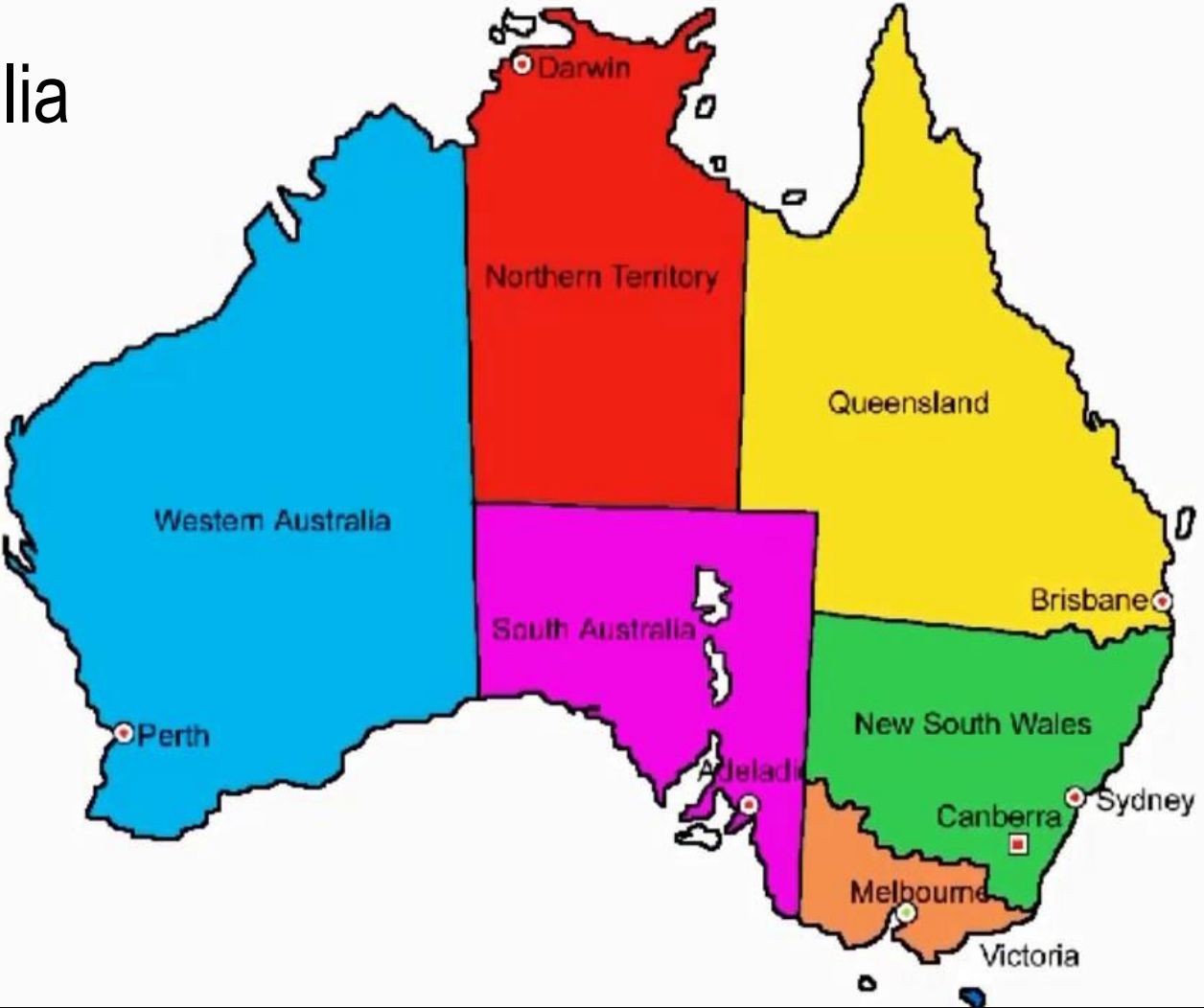


Educating for collaborative practice: a literature interpretation generating reflective questions

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Context

- Edinburgh Declaration, 1998¹ – a pledge to alter the character of medical education to more effectively meet the needs of society, including the following recommendation:
- Increase the opportunity for joint learning between health and health-related professions, as part of the training for teamwork
- An umbrella term adopted for this phenomenon: **Educating for collaborative practice²**

Presentation aims:

- To acknowledge achievements since the declaration
- To present a perspective framed as a series of questions to encourage reflection on future directions

Methods: Literature interpretation, informed by philosophical hermeneutics

- Text sets comprising reports and reviews from a section of international literature over past 30 years
 - compiled using terms *interprofessional education* (IPE) and/or *interprofessional learning* (IPL) AND *review* and/or *report*
- Interpretation:
 - Engaging with meanings as presented in chosen texts - **question and answer dialogue**
 - Iterative returns to the texts to explore emerging understanding - **hermeneutic circle of understanding**
 - Ensuring parts of our understanding from particular texts were fused with complete understanding of the texts as a whole - **fusion of horizons**

Results

- **Achievements:** Educating for collaborative practice (under banner of IPE and IPL in text sets from the international literature) is a well recognised and sought-after phenomenon, and is now embedded in educational policy and curricula in many institutions globally
- **Thoughts for future directions:** Our 'gaze' has produced questions, rather than answers, for ongoing dialogue in relation to 3 themes

Theme 1. Establishing shared understanding AND purpose behind use of terminology

- Value in articulating the purpose of defining terms, especially when complying with stipulating conditions so these conditions in one context do not inappropriately adjudicate or exclude experiences in different contexts
- Questions may be a starting point *for...critical discussion surrounding the purpose, function and utility of IPE to enable IPE to reflect shared dialogue rather than historical power imbalances within healthcare systems²*

Theme 1: Questions:

- How can we achieve balance between terminology bringing people together through shared understanding, and it excluding different perspectives
- How can shared understandings lead to shared purpose without limiting curiosity of what lies beyond?

Theme 2. Being a conduit AND sharing responsibility for change

- Structural changes are valued, but still need to ensure that ALL educators have personal responsibility to ensure students are socialised to be members of their own profession AND are positively attuned to collaboration
- Implied within the following questions is interest in exploring the socialisation (inadvertent or otherwise) that predisposes students to reproduce non-collaborative interactions

Theme 2: Questions

- Is there potential for educators in inter-professional settings to share responsibility for educating for collaborative practice with educators in uni-professional situations?
- Is this responsibility assumed or is it seen as *not relevant* or *too difficult* to implement across both uni- and inter-professional education strategies?
- How might uni-professional educators socialise students' expectations for the norm to be positive collaborative relationships with other professions?
- What would positive role-modelling of collaborative relationships by uni-professional educators look like?

Theme 3. Exploring ways of doing things AND ensuring ongoing inclusivity

- Underpinning the exploration of educational strategies was the sense of inclusiveness
- It is far too common for interprofessional education and collaborative practice to become ends in themselves....the patient gets lost as practitioners consider strategies to understand roles and scopes of practice and dynamics, and become good at conflict resolution⁴
- A key consideration for patient involvement may relate to power imbalances. Inherent in the questions is the potential to explore the value of including the voices and perspective of patients in educating for collaborative practice.

Theme 3: Questions

- Is overcoming the perceived barrier of medical privilege and physician centrism⁵ likely to be more successful if the narrative is focused on the patient, with an explicit patient-centred approach to educating for collaborative practice?
- Is there scope for those involved in educating for collaborative practice to further explore the potential to explicitly include patients, carers and families?
- What would this look like? How may it happen?

Conclusions

- Interpreting the current literature on 'educating for collaborative practice' has generated questions for reflection on how it may be otherwise
- Embrace the tensions inherent in unanswered questions to provide space for communication, initiative and diversity of thought

Ask yourself, in relation to the 3 themes:

- What terminology best suits my purpose?
- What is about this terminology that suits my purpose?
- Should I make it explicit for others?

- What is the nature of the change I am seeking?
- To what extent do I view the responsibility for this change to be shared with others across the broader educational framework?
- How does my representation of the strategy reflect this?
- Should I make this explicit for others?

Who am I including in my educational strategy?

What is the nature of their input?

How does my representation of the strategy reflect this?

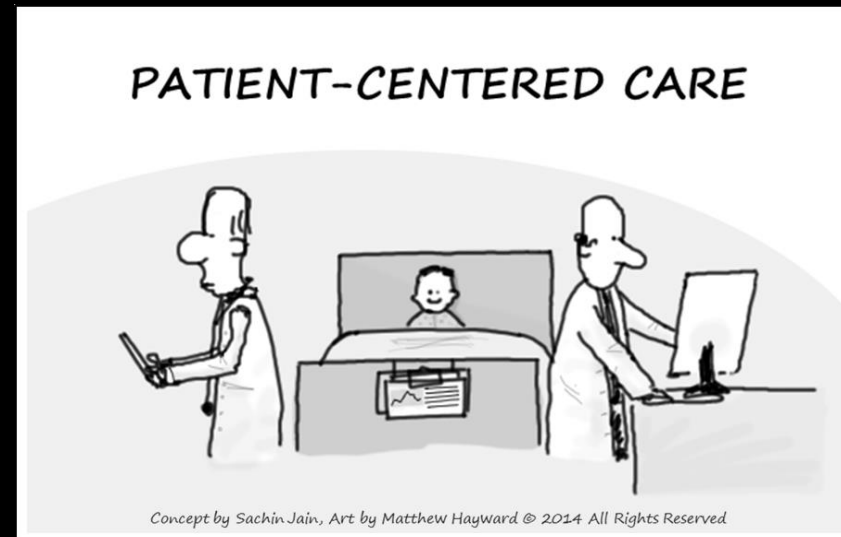
Should I make this explicit for others?

Our new horizon of understanding is encapsulated by...

- The phenomenon of 'educating for patient-centred collaborative practice'
- We have asked ourselves, what can we learn by embracing, holding and exploring the tension between patients being the 'outcome of' and 'being integral to' the collective process of educating for patient-centred collaborative practice?

Future directions

- An ongoing dialogue with the literature is proposed
- Is educating students for a collective identity in settings where they are learning for and with patients likely to advance educating for patient-centred collaborative practice?



References

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