NIPNET 2014
nipnet14.wordpress.com
Stockholm October 2-3

Hosted by Centre for Clinical Education
www.cku.ki.se

Invited speakers and abstracts
Content

Invited speakers

Key note speaker

Professor Liz Anderson .................................................................................................................. 6

IPE research presenters

Uffe Hylin ........................................................................................................................................ 7
Hanna Lachmann ............................................................................................................................ 8
Birgitte Nørgaard .......................................................................................................................... 9

Closing talk

Emeritus Professor Hugh Barr ....................................................................................................... 10

Workshops

1 To include interprofessional education at a strategic and operative management level to promote quality of future healthcare
   Anna Kiessling, Lena E. Boman, Margaretha Forsberg Larm, Margaretha Risén and Lars-Arne Haldosén ....... 11

2 The team conference at the Clinical Education Ward- an opportunity for interprofessional teams to grow
   Rene Ballnus, Annelie Lannebo, Malin Dandanell, Helena Brodin and Ann-Sofie Cissé ............................. 12

3 Narrative supervision a way of facilitating interprofessional transfer learning at a student driven health clinic
   Mulle Signe Nielsen, Annemette Vibeke Rasmussen and Kirsten Anette Falk ............................................. 13

4 Sharing experiences of Interprofessional learning in a clinical setting
   Eva Barkestad, Barbro Nilvér, Carina Wallingstam, Emma Öbrink and Anna Björnsdotter ............................ 14

Oral presentations in parallel sessions

1 Clinical interprofessional education in Sweden and Denmark
   Flemming Jakobsen ....................................................................................................................... 15

2 What’s special with CTW supervisors? - A qualitative study
   Elinor Andersson and Lena Dahl ...................................................................................................... 16

3 Relational Coordination as a frame for the collaboration in an Inter-professional Clinical Study Unit
   Hanne Lisby ...................................................................................................................................... 17

4 Health professionals’ attitudes towards Inter Professional Learning and Collaboration
   Erik Vestergaard and Birgitte Nørgaard .......................................................................................... 18

5 Multi disciplinary team, working with elderly persons living in the community - a systematic literature review
   Gudrun Johansson, Kajsä Eklund and Gunilla Gosman-Hedström ..................................................... 19

6 From chaos to a new idea
   Christina Finsbäck, Gudrun Johansson, Ása Sunesson, Helle Wijk and Carin Willén ............................... 20

7 Interprofessional collaboration may pay off: introducing a collaborative approach in an orthopedic ward
   Britta Pape, Pernille Staal Thiesen, Flemming Jakobsen and Torben Baek Hansen ............................... 21
8 Interprofessional education: an overview of the rural context

Lorraine Walker

9 Role understanding and modes of cooperation in inter-professional collaboration at two municipal rehabilitation units

Dorte Lyby Noremburg, Inger Taasen, Bjørg Christiansen, Kjellaug Kildal Hansen and Nora Hagstrøm

10 The knowledge of professionals who in special education and rehabilitation centre about the inter professional collaborative practice in Turkey

Sezer Domac, Fatih Sobaci and Ali Yildirim

11 Interprofessional collaboration: The development of joint dialogues in mental health care

Anne-Lise Holmesland

12 Interprofessional case seminars in primary healthcare

Christina Olsson, Zahra Akbari, Helena Sohman and Ulla Thörblom

13 Interprofessional training in diabetes and obesity policlinics in primary health care

Tiina Tervaskanto-Mäentausta and Essi Varkki

14 Case-based learning - focus on person-centered care

Charlotte Hedberg, Eva-Lena Attestad Saxon, Sandra Holtmo, Ninni Åkesson, Fahimeh Lamian and Elisabeth Rydwick

15 An operating theatre for interprofessional learning

Staffan Pelling, Gudrun Möller, Karin Björnström-Karlsson and Elisabeth Ericsson

16 An effort to winding future nurses and physicians together. Students’ joint learning about wound management

Anne Friman, Desiree Wiegleb Edström and Samuel Edelbring

17 Multidisciplinary Eating Disorder Programs: Team Challenges and Helpful Tips for Making it Work

Kirsti Bissada, Christine McPherson and Dianne Groll

18 Health and social care students at different cohort and their experience of workshop and online interprofessional education - a pilot study

Synnøve Hofseth Almås and Frøydis Vasset

19 Inter-professional collaborative learning: Learning about, from and with each other – across 6 different professions

Inger Taasen, Lena Andersson, Tove Skjerve-Nielsen, Elsa Nybø, Bente Kongsgård, Anne Kittelsen, Marthe Hafstad Augdahl and Nina Lühr

20 Problem based learning (PBL) including drama games as a motivating learning approach in interprofessional education (IPE)

Camusa Hatt

21 Crossing locations of enacting and observing simulations: ways of construction for interprofessional learning

Johanna Dahlberg, Sofia Nyström, Håkan Hult and Madeleine Abrandt Dalgren

22 Undergraduate Interprofessional Simulation: an innovative pilot project

Jodie Gwenter

23 Integrating doctors and midwives in the art of delivery

Gloria Esegbona and Joy Palmer
Posters

1 Physiotherapy students learn IPL in a clinical setting
   *Malin Ortfelt, Belinda Sarlija and Charlotte Kaijser* ................................................................. 38

2 Interprofessional learning environment - Physiotherapy- and nursing students’ module 12
   *Pernille Kjaer Svendsen, Anne Nimb and Lotte Dahl* ........................................................................... 39

3 IT support for students and tutors in Primary Healthcare to facilitate self-directed learning and the implementation of interprofessional education
   *Eva Toth-Pal, Katarina Rolfhamre, Marina Reuterswärd and Pontus Järlund* ................................. 40

4 Interprofessional Communication in ever changing health system
   *Jackline Sarah MacHaria* ...................................................................................................................... 41

5 High school peer tutor training - Innovative approach to learn and empower skills for future health choices
   *Tiina Tervaskanto-Mäentausta and Ulla-Maija Seppänen* ................................................................. 42

6 Interprofessional education, IPE, at a thoracic surgery ward
   *Henrik Pettersson* ................................................................................................................................. 43

7 Hall of Mirrors: Reflecting on reflections during an inter professional placement
   *Constantina Lomi and Rene Ballnus* ...................................................................................................... 44

8 Reflection as a tool for learning interprofessional competence
   *Anki Näström* .......................................................................................................................................... 45

9 Team building training – Facilitating Interprofessional teams – a continuing process for quality of care
   *Uffe Hylin, Margaretha Forsberg Larm, Marie Sjöstedt and Sari Ponzer* ............................................ 46

10 To facilitate interprofessional learning (IPL) at the academic health care centers in Stockholm County, Sweden
    *Maria Kvarnström, Margaretha Risén and Ulla Thörnblom* ................................................................. 47

11 The controversy about the controversial belts – ground for interprofessional learning
    *Tuija Viking* ........................................................................................................................................... 48

12 Using art to achieve Interprofessional Learning
    *Gloria Esegbona, Joy Palmer and Hiba ElHassan* .................................................................................. 49

13 Interprofessional education and collaborative practice in Criminal Justice system
    *Ali Yıldırım and Ercan Balcıoğlu* ........................................................................................................... 50
Invited speakers

Key note speaker

Professor Liz Anderson

Professor Liz Anderson leads interprofessional education (IPE) within Leicester Medical School. She trained as a nurse at St Bartholomew’s Hospital London and later moving to Leicester to work as a Midwife, Health Visitor and finally, moved into research and education. From within Leicester Medical School she has led new patient-centred teaching initiatives. She co-designed the Leicester Model of Interprofessional Education which enables students to learn from patients and practitioners when in practice.

She was awarded a National Teaching Fellowship by the Higher Education Academy for outstanding contributions to education in 2007.

She is widely published in the area of IPE and has served on the Board of the Centre for the Advancement of Interprofessional Education (UK) – CAIPE (www.caipe.org.uk).

She continues to lead IPE education and research which involves partnership working with patients and carers.

Title of speak;

To prepare future professionals for interprofessional collaborative practice
- experiences and challenges
IPE research presenters

The IPE research session includes 3 presentations by Uffe Hylin, Hanna Lachmann and Birgitte Nørgaard who are presented below with some selected references.

Uffe Hylin

Uffe Hylin is a senior consultant in orthopedic surgery and senior lecturer/associate professor in medical education, especially interprofessional education. He has been working at an interprofessional training ward for more than ten years. His thesis describes the implementation, development and evaluation of the interprofessional training wards in Stockholm.

Title of speak; Learning with each other - the team challenge

References

PhD Thesis:

Hylin, Uffe: Interprofessional Education, Aspects on learning together on an interprofessional training ward. 2010, Karolinska Institutet
http://publications.ki.se/xmlui/handle/10616/38978

Articles:

Hanna Lachmann

Hanna work as a clinical senior lecturer at Sophiahemmet University College. The starting point of her research was to introduce and adapt the Contextual Activity Sampling System (CASS) methodology for clinical educational use and to contribute to a broader understanding of how students experience interprofessional learning activities. There is a need for more detailed understanding about how learning occurs continuously in specific contexts, and especially during interprofessional educational activities. This is important for enable support during clinical practice concerning several aspects of the education that must be taken into consideration.

**Title of speak:** Promoting reflection by using contextual activity sampling

**References**

**PhD Thesis:**


**Articles:**

Birgitte Nørgaard

Birgitte is a RN, MSc and PhD in Public Health. Her research is focused on communication in health care, interprofessional education and inter-professional team-work. Birgitte is consultant at University of Southern Denmark, doing research in public health and teaching master and PhD students.

Title of speak; The effect of interprofessional team training on relational coordination

References

PhD Thesis:
Nørgaard B. Communication with patients and colleagues. An intervention study on the impact of a communication skills training course on health care professionals’ ability to communicate with patients and colleagues. Dan Med Bull 2011;58(12):B4359.

Articles:

- Nørgaard B, Ammentorp J, Kyvik KO, Kofoed PE. Training improves inter-collegial communication. The Clinical Teacher 2012; 9: 173-177
Closing talk

Emeritus Professor Hugh Barr

Hugh Barr seeks to open channels for exchange and mutual support between interprofessional activists nationally and internationally as President of the Centre for the Advancement of Interprofessional Education (CAIPE), Emeritus Editor of the Journal of Interprofessional Care, Co-Convener of the World Coordinating Committee Interprofessional Education and Practice, and longstanding friendship with NIPNET.

Recent publications (www.caipe.org.uk) include a review of prequalifying interprofessional education (IPE) in the United Kingdom (UK) with Marion Helme and Lynda D'Avray and guides to help promote IPE in the UK and worldwide with Helena Low.

Hugh is Emeritus Professor of Interprofessional Education and Honorary Fellow at the University of Westminster holding visiting chairs in the UK and Australia and honorary doctorates from Southampton and East Anglia.

A qualified social worker, he worked previously in probation, prison after care, criminology and social work education as an Assistant Director of the then (UK) Central Council for Education and Training in Social Work.
Workshops

1 To include interprofessional education at a strategic and operative management level to promote quality of future healthcare

Anna Kiessling, Lena E. Boman, Margaretha Forsberg Larm, Margaretha Risén and Lars-Arne Haldosén

Abstract Summary: We aim to describe management implementation of healthcare interprofessional education. Previously interprofessional education of healthcare students has been dependent on individual enthusiasts. The last years The Board of Higher Education at Karolinska Institutet has taken strategic steps. All organizational levels have been involved to include IPE as a corner stone in healthcare education.

Abstract text: Karolinska Institutet (KI) offers more than 25 undergraduate and master's programmes leading to professions in health care and medicine. In most higher education in health and medicine, the students are trained separately within their own profession with minimal interaction between different professions. To enhance the students' ability to collaborate with other health professionals to promote quality of future health care, interprofessional education (1) has been introduced at KI. Clinical Training Centres and Clinical Trainings Wards were established at the four university hospitals in the Stockholm area as early as in 1998. The main aim was to facilitate clinical interprofessional education (IPE) and collaboration between both students and teachers. However, the IPE development has over the years been dependent on the work of pioneers and enthusiastic teachers and on supervisors among health care professionals. The aim of this presentation is to describe how support of implementation of IPE in education programmes now is included at management level. The last years The Board of Higher Education has taken several strategic steps to formalize and strengthen IPE as an essential part of each programme. Shared interprofessional learning outcomes at three taxonomic levels have been stated. These are now implemented in the curriculum of all undergraduate programmes. Each programme has assigned an IPE promoter to facilitate development of IPE activities and assessments. A robust strategic organisation with an IPE working group at board level has been established. To succeed with the implementation of IPE and make it sustainable, all levels within an organisation need to be included in the process (2) Therefore, the group works in close contact with the working groups for both clinical education and pedagogic development as well as with the Centre of Clinical Education, with the purpose to develop interprofessional education and faculty development in health care settings, and with the Unit of Medical Education running faculty development courses. Further the IPE working group supports competence development and network for the promoters and also evaluate IPE issues in the programmes’ management plans and supports IPE elective courses. Our conclusion is that it is time to include IPE as a corner stone in healthcare education rather than as a “Turkish delight” on the top.

References

Keywords
health and social care, implementation strategy, Interprofessional education, management

Contact information
Anna Kiessling
Anna.Kiessling@ki.se
Department of Clinical Sciences, Karolinska Institutet, Stockholm, Sweden
2 The team conference at the Clinical Education Ward- an opportunity for interprofessional teams to grow

Rene Ballnus, Annelie Lannebo, Malin Dandanell, Helena Brodin and Ann-Sofie Cissé

The team conference
The CEW Huddinge is a clinical interprofessional training ward held at an orthopedic ward at the Karolinska University Hospital. At the CEW students of occupational therapy, nursing, physiotherapy and medicine work together under supervision from supervisors to answer for the care and rehabilitation of eight patients during a period of two weeks. The pedagogical platform is based on interprofessional education (IPE).

During a day at the CEW the students have a team conference at which the patients are introduced from all the students’ different perspectives. The team conference offers a unique pedagogical opportunity for reflection, planning the patients’ future treatment and rehabilitation as well as an opportunity for the students to show their specific knowledge about the patients and teach their fellow students about their own professional viewpoint. Thus also aligning this pedagogical activity to the interprofessional educational goals of the course: to learn of, with and from each other.

We would at NIPNET like to present the team conference at CEW Huddinge to inspire activities of the same kind in other venues and perhaps also get feed-back to further develop our work.

Contact information

Rene Ballnus
rene.ballnus@karolinska.se
Karolinska University Hospital, Huddinge, Sweden
3 Narrative supervision a way of facilitating interprofessional transfer learning at a student driven health clinic

Mulle Signe Nielsen, Annemette Vibeke Rasmussen and Kirsten Anette Falk

We have years of experiences with interprofessional student groups, from six different health professions, learning through participating in health promotion activities at a student driven health clinic at the university. The students organize and teach at various health promotion courses to fellow students.

We would like to present the challenges and strategies developed and tested in a pedagogic experiment within the health clinic at Metropol. The project has a theoretic frame with a combination of transfer learning and narrative supervision. It is carried out with students from three different professions, who teach pregnant students and their spouse at a birth preparation course at the Metropol health clinic. The students organize and facilitate the teaching in collaboration and are only supported by the professors in there learning process. We have adjusted the learning frame, so it reflects the ideas of transfer learning and facilitate the students’ reflections within a narrative supervision approach. We will be able to present the results and experiences from the project. The project is first due to the final evaluation may/july, therefore we will not be able to present a final abstract until late august. The evaluation design is a combination of focus groups and a questionnaire.

The project is part of the large UDDX project “The profession oriented education laboratory” In Danish “Det erhvervsrettede uddannelselslaboratorium” funded by the Danish Region Hovedstaden and the European Social Fund.

Contact information

Mulle Signe Nielsen
muni@phmetropol.dk

Annemette Vibeke Rasmussen
amra@phmetropol.dk

Kirsten Anette Falk
kifa@phmetropol.dk

Metropolitan University College in Copenhagen, Department of Interprofessional studies, Denmark
4 Sharing experiences of Interprofessional learning in a clinical setting

Eva Barkestad, Barbro Nilvér, Carina Wallingstam, Emma Öbrink and Anna Björnsdotter

One of the most important factors to have a high standard of patient safety and high quality care is collaboration between different healthcare providers. Not to let, professional hierarchy become a limitation. The professional team should collaborate in the strategic planning and set aims for treatment and care.

We wanted to develop a concept of study environments where students from different health care professionals could meet and interact with, learn from and about each other. At the Department of Anaesthesia and Intensive Care at Danderyds Hospital, Stockholm we let students participate in three learning modules. OpLeanAn, a concept where we let students from different professional roles take care of a patient admitted for ambulatory surgery. The learners follow and take care of the patient through the peri-operative process. At the Intensive care unit the various student categories participate and contribute in a sitting round with the inter-professional healthcare team. The last set up is that we let the students be responsible for care and treatment for a patient admitted to the ICU with failure in his or hers vital signs. All students in these activities have support from a supervisor from each professional role.

We want to share with you, our experiences -IPL in the clinical setting.
How can or is IPL be integrated within your work place?
What can we learn from this?
How do we support the supervisors?

Keywords
interprofessional, clinical setting, communication

Contact information
Eva Barkestad
eva.barkestad@ds.se
Anesthesia and intensive care department, Danderyd hospital, Stockholm, Sweden
Oral presentations in parallel sessions

1 Clinical interprofessional education in Sweden and Denmark

Flemming Jakobsen

**Background** The first described interprofessional training unit (ITU) was established in Linköping in 1996 and followed by Stockholm two years later. These initiatives have inspired several other universities and hospitals in Sweden and Denmark to establish ITUs.

**Objective** To provide an overview of Swedish and Danish ITUs and to synthesize published findings from these.

**Methods** The ITUs were identified via NIPNET's homepage supplemented with personal communication with colleagues from the field. Information from the ITUs was collected by the help of questionnaires supplemented with data from the ITU’s homepages. Articles from peer reviewed journals were identified via systematic searching of the databases Pubmed and Cinahl supplemented with personal communication with colleagues from the field.

**Results** Four Danish and fourteen Swedish ITUs were identified. Patients admitted to the ITUs in question were: orthopedic (10), geriatric (3), medical (3), emergency (1) and obstetric (1). Students were normally two weeks in the ITU. Most commonly represented were students from the professions nursing, medicine, occupational therapy and physiotherapy; nine other professions were separately represented. The described aims for the ITUs encompassed many identical elements. Many similarities were found when looking at the pedagogical approach but it was also identified that there can be different paths headed for the same goal. Danish (8) and Swedish (19) articles revealed that the students reported on having improved their uniprofessional knowledge and strengthened their professional identity while learning about interprofessional collaboration. Equality, collaboration and common goals for the students were found to be important parameters for obtaining pedagogical and operational success in an ITU. Patients perceived their stay in an ITU to be highly satisfactory. And finally it was found that the running of an ITU can be cost-effective.

**Implications** This presentation elucidates that there is no one right way to provide clinical interprofessional education. Different organizational and pedagogical approaches can result in apparently comparable results.

**Keywords**
Clinical; interprofessional education; Sweden; Denmark.

**Contact information**
Flemming Jakobsen  
flemming.jakobsen@vest.rm.dk  
Orthopedic Research Unit, Regional Hospital West Jutland, Denmark
2 What’s special with CTW supervisors? - A qualitative study

Elinor Andersson and Lena Dahl

Background: Student’s experience of clinical practice at an Interprofessional Clinical Training Ward (ICTW) is often evaluated as different compared with other clinical placements. However, the clinical supervisor’s appreciation of their role as team coaches at the ICTW has not been explored. At the ICTW of county council of Östergötland, student teams with members from four professions are responsible for all processes around the patients. This means that everybody participate in all procedures around care, medical treatment, and rehabilitation.

Method: Interviews from night teen supervisors of three different ICTW were analyzed using a phenomenological, qualitative method. The supervisors represented nurses, OTs, PTs, and MDs.

Results: Three categories were identified; 1) the ICTW supervisor "soul", 2) the concept of ICTW, and 3) "to supervise". The supervisor is dedicated to team work, students learning, pedagogy, and supervision of teams. The coaching of student teams, in order to support students learning about team work, is also related to the supervisors desire to improve health care systems. Compared to clinical professional practice, where the students are integrated into a professional practice, the students at the ICTW are in a peer learning environment, and the supervisors are “following” the student team. However, it is the knowledge of the students, the concept of ITCW, and the student team altogether that “makes it work”. Hence, the supervisor has to have knowledge in group processes and communication, and also how to challenge students learning processes.

Key words: Interprofessional supervisor, Clinical training ward, Interprofessional learning, Team.

Contact information

Elinor Andersson
elian025@student.liu.se or elinor.andersson@lio.se
Linköping University and Vrinnevisjukhuset, county council of Östergotland, Sweden

Lena Dahl
lena.dahl@liu.se
Linköping University, Sweden
3 Relational Coordination as a frame for the collaboration in an Inter-professional Clinical Study Unit

Hanne Lisby

**Background:**
The aims for the Study Unit are to create an authentic learning lab for the students from nursing, occupational therapy and physiotherapy, which will encourage them to be engaged in interprofessional work.

In the beginning it was a challenge in The Inter-professional Clinical Study Unit to introduce the concept of inter-professional thinking to the students. But in the Relational Coordination Theory we found that the focusing on *Shared goals, Shared knowledge and Mutual Respect* offered an ideal frame for the organization of the inter-professional work among the students.

This study explore in which way the Relational Coordination influenced the inter-professional collaboration between the students.

**Objectives:**
54 students from Occupational Therapy, Physiotherapy and Nursing were included in the study. All data was collected in spring 2013 after their 2 weeks stay in the unit. Response rate for the educations were between 82 – 86%. All data were anonymous.

**Methods:**
A qualitative study, based on an essay-evaluation design. All data were analyzed due to Systematic text condensation, as described by Kirsti Malterud (2012).

**Results:**
- Working with shared goals and shared knowledge has developed the student's ability to focus on the patient-centered care.
- The students have experienced that though the shared goals and shared knowledge were a challenge to start with – they very quickly were confident with each other and felt that it increased the quality of the rehabilitation.
- The students experienced that this approach increased the patients’ feeling of coherence and safety.
- The rules for communication have increased the student’s responsibility for a timely, accurate and precise communication.

**Implication**
According to the health systems, which become more and more complex, we think that these results will meet the needs for a “Collaboration ready” healthcare workforce.

**Contact information**
Hanne Lisby
[hanne.lisby@rn.dk](mailto:hanne.lisby@rn.dk)
Aalborg Universitetshospital, Denmark
4 Health professionals’ attitudes towards Inter Professional Learning and Collaboration

Erik Vestergaard and Birgitte Nørgaard

**Background** In the Region of Southern Denmark, the vision for all hospitals includes health professions collaborating and working in multi-specialized interprofessional teams. In Kolding Hospital, this vision is brought forward by the Emergency Department and the Department of Orthopaedic Surgery by focusing on management commitment, training courses focusing on the ideas of Interprofessional Learning and Collaboration - IPL/IPC, thus establishing interprofessional team structure across professional settings.

**Objectives** This project describes the development of health care professionals’ attitudes towards and their understanding of inter-professional learning and team collaboration. Methods The health care professionals' attitudes were assessed by means of field studies. Statements and attitudes were observed and systematically collected and described.

**Results and Conclusions** This project reveals changes in the health care professionals’ attitudes towards and understanding of IPL/IPC during the project. In a uni-professional setting, each profession presents attitudes related to the cognitive map (mindset, perspectives, logic and comprehension) of own profession. Inter-professional settings gives professions opportunities to present own attitudes and understanding to and have that understanding challenged by other professions. An inter-professional setting gives health professions opportunities to create more nuanced and synthetic understanding together towards issues within the concept of IPL/IPC. The project also explored to which extent the health care professionals’ attitudes towards IPE/IPC met the management’s expectations and furthermore, it showed the importance of involving patients in planning coherent patient pathways.

**Keywords:**
Attitudes, uni contra interprofessional statements about IPL/IPC, interprofessional team, IPL/IPC training courses

**Contact information**

Erik Vestergaard
[erik.vestergaard@rsyd.dk](mailto:erik.vestergaard@rsyd.dk)
Lillebaelt hospital, Denmark

Birgitte Nørgaard
[binorgaard@sdu.dk](mailto:binorgaard@sdu.dk)
University of Southern Denmark, Denmark
5 Multi disciplinary team, working with elderly persons living in the community - a systematic literature review

Gudrun Johansson, Kajsa Eklund and Gunilla Gosman-Hedström

Introduction: As the numbers of elderly persons with complex need are increasing, teams for elderly persons have been suggested as a means of meeting the need of complex care for frail elderly persons with multi-diseases. However there is a lack of evidence to show the impact of team work from the perspective of elderly people.

Aim: The aim of this paper was to examine knowledge in scientific literature about multi-disciplinary team, working with elderly persons living in the community.

Method: The method was a systematic literature review and a total of 33 articles was analysed.

Result: The result of the review describes team organisation, team interventions and factors that influence teamwork.

Conclusion: Working in team is multifaceted and complex. It is important to develop strategies and patterns for interventions as a team. The team process itself is also of great importance. Factors for developing effective and efficient teamwork are suggested.

Keywords:
geriatric, community care, home care, teamwork, team process, intervention

Contact information
Gudrun Johansson
gudrun.johansson@neuro.gu.se
Sahlgrenska University Hospital, Department of Occupational Therapy and Institute of Neuroscience and Physiology/ Occupational Therapy, Sahlgrenska Academy at University of Gothenburg, Gothenburg, Sweden

Kajsa Eklund
The Vårdal Institute, The Swedish Institute for Health Sciences and Institute of Neuroscience and Physiology/ Occupational Therapy, Sahlgrenska Academy at University of Gothenburg, Gothenburg, Sweden

Gunilla Gosman-Hedström
The Vårdal Institute, The Swedish Institute for Health Sciences and Institute of Neuroscience and Physiology/ Occupational Therapy, Sahlgrenska Academy at University of Gothenburg, Gothenburg, Sweden

Published in Scandinavian Journal of Occupational Therapy, 2010; 17: 101-16 Correspondence: Gudrun Johansson, Institute of Neuroscience and Physiology, the Sahlgrenska Academy at University of Gothenburg, Box 455, SE-405 30 Gothenburg, Sweden. Tel: +46 31 786 57 32. E-mail: gudrun.johansson@neuro.gu.se
From chaos to a new idea

Christina Finsbäck, Gudrun Johansson, Åsa Sunesson, Helle Wijk and Carin Willén

Team training has been conducted since 2001 at an educational ward in collaboration between four programs within the Sahlgrenska Academy Gothenburg University and the geriatric clinic at Sahlgrenska University Hospital. Due to economic reasons at the hospital the geriatric ward was closed 2012. The Academy was without an educational ward - chaos! A new form to allow for team training needed to be developed promptly. The Occupational Therapy (OT) and Physiotherapy (PT) programs chose to create an arena for team training within the University where persons with chronic disorders were engaged as clients. Their narratives became the basis for the students’ to share knowledge. During a two week period, the students met the client twice and worked in between with practical exercises, literature studies, seminars and a final examination. The content and the structure have been developed continuously, first by including students from the dietician (D) and nursing (N) programs. Another step was when the hospital offered arenas for the new form. Today team training is mandatory for all students at D, N, OT, PT program during a period of two weeks. The module hand-book is common but the arenas vary. Course evaluations show that students increase their understanding of other professions and the need for interaction between different professions in health care and ask for an extension of inter-professional learning during their education. We have created a new form of team training, where students from several programs through inter-professional learning focus on their own team process and develop knowledge about collaboration in teams by learning with, from and about each other. We complies with the target that students should "demonstrate the capacity for teamwork and collaboration with other groups", as well as WHO’s intention that inter-professional learning during education is necessary to prepare students for cooperation in practice.

Keywords:
Teamtraining, teamprocess, interprofessional learning, educational ward, development

Contact information
Christina Finsbäck
christina.finsback@gu.se
Gothenburg University, Sweden

Gudrun Johansson
gudrun.johansson@neuro.gu.se
Gothenburg University, Sweden
Interprofessional collaboration may pay off: introducing a collaborative approach in an orthopedic ward

Britta Pape, Pernille Staal Thiesen, Flemming Jakobsen and Torben Baek Hansen

Background Interprofessional collaboration is imperative for optimizing pain management and achieving early mobilization and shortening the length of stay in hospital for patients admitted for hip or knee arthroplasty (HKA).

Objective To introduce a daily interprofessional meeting in an orthopedic ward and to test if this initiative would influence length of stay (LOS) for patients admitted for HKA.

Methods With the intention of promoting interprofessional collaboration among the professions nurses, surgeons, PTs and OTs a working group consisting of the main coordinators for these groups was established. On the basis of various important issues in a patient path and the standard criteria for discharge of patients admitted for HKA the working group constructed a checklist for best practice at the interprofessional meetings. The main coordinators made sure to instruct colleagues from their own profession with regard to the checklist. The design of the study was a case-control study comparing LOS in hospital for patients admitted HKA before and after introduction of interprofessional meetings using the same discharge criteria during both periods.

Results The daily interprofessional meetings were successfully implemented from the start of 2008. All patients admitted for HKA (75) in the three last months of 2007 and all patients admitted (88) the first three months of 2008 were included in the study. After introduction of the interprofessional meetings we found a significant decrease in LOS for patients operated in the hip (from a mean of 4.1 days to 2.7 days) and an insignificant decrease in LOS for patients operated in the knee (from a mean of 3.7 days to 3.1 days).

Implications This presentation reveals that if main coordinators from different professions work together as a team with the purpose of establishing interprofessional collaboration in meetings this may result in shorter LOS for the patients without any reduction in the quality, safety and care for the patient.

Keywords

Interprofessional collaboration, Interprofessional outcomes, Interprofessional practice

Contact information

Britta Pape
britta.pape@vest.rm.dk
Department of Orthopedics, Regional Hospital Holstebro, Denmark
8 Interprofessional education: an overview of the rural context

Lorraine Walker

There has been increased awareness and progress in interprofessional education activities for undergraduate health professional education in Australia although it is yet to become embedded into curricula and the clinical learning environment. Whilst there are some interprofessional activities and initiatives, there is little synchronisation between states and a lack of shared vision. Currently, interprofessional curriculum development and implementation is characterised as a range of fundamental or grass roots activities, often in rural environments, given that Australia has a large rural population. One of the benefits afforded by rural clinical placements is the opportunity to experience interprofessional learning and practice within primary health care and the local community.

This paper provides an overview of the literature on interprofessional education and learning in the rural context and how interprofessional education opportunities could be formalised, optimised and supported to promote students’ preparedness for interprofessional practice.

The literature search included reports of qualitative, quantitative and mixed method educational intervention studies. There was a limited number of rural studies concentrated in Australia, Canada and the United States of America. Interprofessional settings for activities were mixed, with settings ranging from community programs to a simulation immersion of rural activities. Students’ positive attitudes towards interprofessional education in the rural setting were highlighted although only two studies provided a clear outline of the theoretical frameworks employed. There was inconsistency in the reporting of activities and data and limited information on theoretical foundations and the development of competencies which needs to be addressed.

This review adds to the existing body of interprofessional literature and highlights that significant outcomes can be achieved in the rural clinical learning environment to promote interprofessional education for undergraduate students.

Keywords
Interprofessional education, healthcare, rural, undergraduate, clinical learning environment

Contact information
Lorraine Walker
lorraine.walker@monash.edu
Monash University, Australia
9 Role understanding and modes of cooperation in inter-professional collaboration at two municipal rehabilitation units

Dorte Lyby Norenberg, Inger Taasen, Bjørg Christiansen, Kjellaug Kildal Hansen and Nora Hagstrøm

Background: In the health care sector, the professionals have to solve complex problems and situations. This puts new demands on teamwork and inter-professional competences. While collaboration and cooperation previously has been mentioned as one of several measures, this has become the very structure of the design of welfare services (Report 47, 2008-2009). Cross Professional, collaborative (CPC) learning has become an important educational objective (Report St. 13, 2011-2012). Facilitation of CPC in education is no longer a recommendation but a requirement. A challenge today is that what students learn about inter professional collaboration is not always reflected in the day-to-day work of their practice tutors. The White paper of Education (Meld.St.13, 2011-2012) emphasizes the professional's dual expertise: the individual's own professional competence and her cross-professional knowledge. The optimal balance between the two should ideally be learnt in practice on the ward.

Aim: The intention is to produce knowledge of benefit to the practical field with regard to the professional's role understanding and forms of interaction in the context of rehabilitation. The project will thus have implications for the development of students' learning situations.

Method: The study is based at two municipal rehabilitation units. It is of ethnographic design using case studies. Through the study, we aim at characterizing situations, both formal and informal, where employees with different professions plan and/or perform activities that can be termed cross professional. Data has been collected through participant observation, focus groups, individual interviews and document analysis.

Results: In the presentation, we will focus on situations in which inter-professional collaboration takes place and the expectations and understanding of roles, the various professions have.

Implications: Facilitate and establish inter-professional learning and tutoring programs.

Keywords
Role expectation and understanding Formal and informal collaborative settings Rehabilitation

Contact information
Dorte Lybye Norenberg
Dorte.Norenberg@hioa.no
Oslo and Akershus University College of Applied Sciences Faculty of Health Sciences Department of Occupational Therapy, Prosthetics and Orthotics Postbox 4 St. Olavs Plass, Norway
10 The knowledge of professionals who in special education and rehabilitation centre about the inter professional collaborative practice in Turkey

Sezer Domac, Fatih Sobaci and Ali Yildirim

The methodological approach of this research was qualitative. The participants of this research was 100 professionals who qualified in different professional background such as, special education, primary school teacher working in special education and rehabilitation centre around Turkey. Prior to data collection a pilot study was undertaken to evaluate and refine the data collection methods. The data is collected through the structured interviews. The researchers asked the participants 10 close questions about the Interprofessional Collaborative Practice (IPCP). Thematic analyses technics use for analysis. The result indicated that the professionals who work in special education and rehabilitation centres do not have enough knowledge and opinion about the IPCP. High percentage of them did not share their knowledge with their work colleagues but they can share their knowledge with their friend who works another settings.

Keywords
Speech and language therapy, special education, interprofessional collaborative practice, team working.

Contact information
Ali Yildirim
yildirimali@hotmail.co.uk
De Montfort University, United Kingdom

Sezer Domac
Sezer.Domac@leicester.gov.uk
Leicester University, United Kingdom

Fatih Sobaci
fatihshu@gmail.com
Leicester University, United Kingdom
11 Interprofessional collaboration: The development of joint dialogues in mental health care

Anne-Lise Holmesland

**Background:** In order to find new solutions for mental healthcare for young people, a clinical project entitled Project Joint Development was initiated in southern Norway.

**The aim** was to explore how professionals representing various agencies and professions collaborate in generating dialogues in network meetings. The professionals participated in a two-year educational programme focusing on ethics, dialogues and processes.

**Objectives:** To explore professionals’ understanding of what facilitates or impedes joint and healing dialogues in network meetings involving different professions and agencies for clients with mental health problems or who were at risk of developing such problems and how this is related to the professionals’ various backgrounds.

**Method:** Two focus groups consisting of professionals with education and experience from network meetings were conducted. One group consisted of professionals working in the healthcare sector; the other group consisted of professionals working in the social and educational sector. To illustrate the findings achieved in the focus groups, observations of network meetings will be presented and discussed.

**Results:** The professionals emphasized the challenge inherent in silence and the importance of focusing on different perspectives. Professionals working in the health care sector seemed experienced in how to present their thoughts and emotions to other actors who are present while they found it more difficult to let the patient take the lead and set the agenda. The social and educational workers seemed less experienced in facilitating joint dialogues founded on a reduced hierarchical structure.

**Implications:** By collaborating in network meetings the professional acquire awareness concerning skills to promote healing dialogues. Having focus on factors, which may contribute to joint dialogues, such as the significance of listening and silence increases the professionals' ability, and thus the health care systems in general to create need-adapted solutions to complex problems.

**Keywords**
interprofessional collaboration, network meetings, focus groups, mental health care

**Contact information**
Anne-Lise Holmesland
alholmesland@gmail.com
Soerlandet Hospital, Norway
Interprofessional case seminars in primary healthcare

Christina Olsson, Zahra Akbari, Helena Sohlman and Ulla Thörnblom

**Background.** Specialization in health care and an ageing population places increasing demands on collaboration between different professions. In order to meet people's different needs and provide good care it is necessary that the various professionals have an awareness of each other's areas of expertise and can collaborate.

**Objectives.** To test case seminars as educational method for interprofessional learning.

**Methods.** Students and their supervisors from the area surrounding an Academic Healthcare Center were invited to participate in case seminars according to a cognitive structure for analyses of a case. A lecturer or an adjunct clinical lecturer was responsible for the seminars. After a short introduction the students were presented a summary of an anonymous patient including case history and medical/nursing care history from the patient record. After reading the case they had opportunity to search evidence based information, reflect and formulate questions based on their profession. During the final group seminar all information from the participants was analysed according to a cognitive structure on the white board. Through critical thinking and clinical reasoning a care plan for the patient was discussed.

**Results.** In 2012-2013 ten interprofessional case seminars were performed. In total 63 students from five different professions and supervisors from five different professions participated. There of 64 individuals answered the outcome questionnaire. Mean for overall impression, performance and content was eight on a 10-graded scale, where ten stands for “very satisfied”. New insights for the participants were; "different professions look upon the patient's needs in different ways"; “teamwork and collaboration improve focus on the patient”; importance of learning how to identify, analyse and solve the patient's problems”.

**Implications.** The use of case seminars in primary health care give the possibility for different professions, students and supervisors, to train problem solving based on various patient's situations.

**Keywords**
Clinical reasoning; interprofessional; learning activity; patient care plan

**Contact information**

Christina Olsson
christina.b.olsson@sll.se
Hässelby Akalla Academic Primary Healthcare Center, Sweden

Zahra Akbari
zahra.akbari@sll.se
Hässelby Akalla Academic Primary Healthcare Center, Sweden

Helena Sohlman
helena.sohlman@sll.se
Hässelby Akalla Academic Primary Healthcare Center, Sweden

Ulla Thörnblom
thou@rkh.se
Swedish Red Cross University College, Sweden
13 Interprofessional training in diabetes and obesity policlinics in primary health care

Tiina Tervaskanto-Mäentausta and Essi Varkki

Improving preventive services and facilitating early interventions in public health problems are pivotal challenges according to Finnish National Development Programme for Social Welfare and Health Care (Kaste 2012-15). University of Oulu, Faculty of Medicine and Oulu University of Applied Sciences, School of Health and Social care, planned and organized IP pilots together with health care centre of Oulu. Two medical students and one nursing student planned and carried out together an outpatient visit of primary health care patients with diabetes and obesity. These patients were chosen since diabetes and obesity are today among the most important public health issues in developed countries. Aims of the study were to investigate students’ attitudes towards IPL and their learning.

Teachers from both of the universities and a doctor and the diabetes nurse from the health care centre planned and organized the pilots. The students were third year medical and fourth year nurse students. The patients were diabetes type 2 (DM2) patients or obese DM2 patients. One group had to take care of one patient visit independently. Prematerial was prepared for the students, like recommendations of the evidence base care and guidelines for patient examination. After the general info to all, students got familiar with the patients prior medical history together with the facilitating doctor and nurse.

Altogether 37 students and 13 patients have participated in the pilots. Students’ attitudes towards IPE were evaluated with RIPLS. They agreed strongly that trusting to each other is important when working in a team. Students felt that it was important to learn to work together during the undergraduate studies in order to become a good team worker in the future. They agreed strongly, that it’s for the patients’ best benefit that professionals work as a team. Clinical skills as well as communicational skills were learned. About the roles and responsibilities one half of the students thought that nurses and doctors have their own skills and tasks. A half of them thought that they have to learn more than the other professionals. When evaluating the learning, students felt they still have to learn much more how to use all information about the patient’s holistic situation, other diseases, strengths and resources for the good care. Students perceived they had adequate skills in teamwork, creating a trustable atmosphere, making good questions to find out patient problems, respect and noticing nonverbal communication.

These pilots have given valuable models to further organize and develop IP training in primary health care sector, which is increasingly responsible for patients with chronic and long-term illnesses. The role of a nurse has become more independent, as well they nowadays often work as a pair with the doctor. Also better collaboration between specialized hospital care and outpatient care in the primary care are required.

Keywords:
Interprofessional training, primary care, diabetes type 2, obesity

Contact information
Tiina Tervaskanto-Mäentausta
tiina.tervaskanto-maentausta@oamk.fi
Oulu University of Applied Sciences, Finland

Essi Varkki
essi.varkki@oulu.fi
Faculty of Medicine, University of Oulu, Finland
Case-based learning - focus on person-centered care

Charlotte Hedberg, Eva-Lena Attestad Saxon, Sandra Holtmo, Ninni Åkesson, Fahimeh Lamian and Elisabeth Rydwik

Background: Training models that provide students with learning tools for a genuine teamwork as future doctors, nurses, physiotherapists, occupational therapists or social workers is needed. Case-based learning is one way but the patient's perspective or experience of illness with ideas, concerns and expectations is often missing.

The aim was to describe an interprofessional pedagogic method based on a person-centered perspective that can be used in a primary care context.

Methods: We have used a student-centered interactive case model there the concrete problems for team work are approached with the help of patient-centeredness. To make sure that the case was realistic the first case was retrieved from an interprofessional home visit with students to an old lady that recently had broken her hip. A pilot involving the teacher was conducted in order to test the case. All categories of students present in the primary health care during the period such as nurse students, physiotherapist students, occupational therapists students, medical students and assistant nurse students' were invited. After each seminar an evaluation was made by the students and they were asked to anonymously write down their thoughts about the seminar.

Results: During the fall of 2013 and spring 2014 six seminars where held and each seminar where attended by five to seven students. Student from all different professions were represented. Each seminar lasted two hours. All students were very satisfied with the seminar. The best part was to learn about and from each other and that there were student represented from different professions. They all thought that the case we used was a case that they all could learn something from.

Conclusion: Our result is encouraging, we conclude this model can be further developed and evaluated as a teaching model for interprofessional learning with a person-centered focus.

Keywords
Case-based learning, interprofessional education, person-centered care

Contact information
Charlotte Hedberg
charlotte.hedberg@ki.se
Karolinska Institutet, Stockholm, Sweden

Eva-Lena Attestad Saxon
eva-lena.altestad.saxon@ki.se

Sandra Holtmo
sandra.holtmo@sll.se

Ninni Åkesson
ninni.akesson@sll.se

Fahimeh Lamian
fahimeh.lamian@sll.se

Elisabeth Rydwik
elisabeth.rydwik@sll.se
15 An operating theatre for interprofessional learning

Staffan Pelling, Gudrun Möller, Karin Björnström-Karlsson and Elisabeth Ericsson

Background. Since the start 1986 the Faculty of Health Sciences at Linköping University has allotted considerable parts of curricula to interprofessional education (IPE) and has since 1996 also been manifest in undergraduate clinical education. Several other small scale IP educational activities have later been developed in different clinical settings. Cooperation between Östergötland county council and affiliated hospitals and the university is close and fruitful. Surgery and anaesthesia is a demanding activity in terms of professional skills and team-work. Educating professionals in the operating theatre is traditionally based on one-to-one exchange, similar to apprenticeship. Patient security is crucial in perioperative care and is related to the quality of team-work in the operating room (OR). Team-work skills can be improved through training.

Objectives To improve educational methods in the OR setting that advance interprofessional team skills as well as student and supervisor learning. Methods, An initiative to develop a learning OR at the University hospital in Linköping started 2012. It includes a special operating room with adjacent observation room, logistic planning within both clinical and educational organisations and a program to follow the implementation in terms of student and supervisor views and general applicability. A special schedule allows time for instruction and planning with learning-focus, rather than patient turnover.

Results More than 20 students from undergraduate, graduate and postgraduate learners in nursing and medicine have passed through. Preliminary data suggest that the concept is positively received by supervisors and students. Allowing time for reflection-in-action reduces stress and improves interaction between professions. The initiative has been awarded 1st price 2014 for clinical education by the county council.

Implications The learning OR has potential for further elaboration.

Keywords
IPL, students, supervision, learning, operating theatre, team-work

Contact information
Staffan Pelling
staffan.pelling@liu.se
Faculty of Health Sciences, Linköping University, Sweden

Gudrun Möller
gudrun.moller@liu.se
Faculty of Health Sciences, Linköping University, Sweden

Karin Björnström-Karlsson
Karin.Bjornstrom.Karlsson@lio.se
Östergötland county council, Sweden

Elisabeth Ericsson
elisabeth.ericsson@liu.se
Faculty of Health Sciences, Linköping University, Sweden
An effort to winding future nurses and physicians together. Students’ joint learning about wound management

Anne Friman, Desiree Wiegleb Edström and Samuel Edelbring

Background Lack of physician-nurse collaboration in wound management may result in prolonged healing process for the patients (Apelqvist, 2012). In order to facilitate future professional collaboration interprofessional undergraduate learning activities has been proposed (Barr et al., 2005).

Objectives The aim of this study is to investigate changes and characteristics of nursing and medical students’ attitudes towards each other’s future professions in relation to a joint learning activity in wound management. Methods Medical (n=40) and nursing (n=50) students were jointly trained in compression therapy, Doppler assessment and wound case studies. Students were measured by the Jefferson scale on attitudes toward Physician-Nurse Collaboration (Hojat, et al., 1999) and compared to previously gathered baseline scores. Focus group interviews were held to deepen the knowledge about characteristics of attitudes towards both the others’ profession and towards collaboration.

Results Students scored high on the Jefferson scale in conjunction to the IPE activity. However, since also the baseline group scored high, no differences were detected after joint training. Preliminary analysis of qualitative data shows that medical students’ consider the nursing role as practically oriented with focus on the patients’ different needs of care, while nursing students sees the role of physicians as generation bound pointing to elderly physicians’ dominance and younger physicians’ flexibility but also to variations between organizational levels of care. Students experienced a lack of structural support for collaboration in their clinical practice. Interprofessional training was considered as important to gain insight into each other’s complementing knowledge area. Furthermore joint training was considered providing wider perspectives of patient care.

Implications The joint learning activity provided new insight into the other profession’s competence, and was appreciated by the students. This kind of learning activity may increase future professional collaboration and thus improve wound management. Efforts should be made to find strategies for structures facilitating collaboration in clinical practice.

Keywords nurse-physician student, collaboration, wound management

Contact information
Anne Friman
anne.friman@ki.se
Karolinska Institutet, Sweden

Desiree Wiegleb Edström
desiree.wiegleb-edstrom@karolinska.se
Karolinska University Hospital, Sweden

Samuel Edelbring
samuel.edelbring@ki.se
Karolinska Institutet, LIME, Sweden
17 Multidisciplinary Eating Disorder Programs: Team Challenges and Helpful Tips for Making it Work

Kirsti Bissada, Christine McPherson and Dianne Groll

Multidisciplinary treatment programs for patients diagnosed with eating disorders, such as Anorexia Nervosa, Bulimia Nervosa, and Binge Eating Disorder can be both challenging and rewarding in a number of ways. A qualitative study of six Canadian and American eating disorder treatment centres was conducted from the perspective of nurses working within these teams. Findings from 35 interviews identified a number of issues, beneficial and detrimental, related to working in teams. Programs included in the study were for-profit and non-profit in nature and consisted of teams comprised of psychiatrists, psychologists, dietitians, nurses, social workers, occupational therapists, recreational therapists, research coordinators, and clerical support staff. Themes related to interprofessional issues that emerged that were challenging for the teams included conflicting approaches to treatment, varied training and backgrounds, unequal workload distribution, communication challenges, and shift work. Themes that emerged that staff reported as helpful for their interprofessional dynamics included meeting patients physical, psychological, and emotional needs using different approaches to treatment, being able to offer patients a variety of personalities to develop therapeutic alliances with, and 24/7 care. Although this research focused on eating disorder programs, the results were similar in the six programs that were included in the study and are pertinent to a variety of health care teams, regardless of the specialty. Participants offered suggestions with respect to ways to function within their teams to maximize patient outcomes.

Contact information

Kirsti Bissada, BA, BScN, MScN, DHA (ABD)
kbissada@hotmail.com
Coordinator of Nursing Education
The Ottawa Hospital, Ottawa, Canada

Dr. Christine McPherson, RN, PhD
Associate Professor
University of Ottawa School of Nursing, Ottawa, Canada

Dr. Dianne Groll, PhD
Associate Professor of Psychiatry and Psychology
Director of Research, Department of Psychiatry, Queen's University, Kingston, Canada
18 Health and social care students at different cohort and their experience of workshop and online interprofessional education - a pilot study

Synnøve Hofseth Almås and Frøydis Vasset

**Background:** There is a growing interest in the use of online IPE, often combined with physical meeting. However, there is great debate about when or how to introduce interprofessional education (IPE) in curriculum from the first day or later and there is no clear consensus on the ideal timing of an IPE. The question is how health care students experience IPE.

**Method:** This study has two sets of data, one from the first year of nursing and biomedical laboratory science (BMLS). In total, 92 students worked in ten interprofessional groups, consisting of 70 nurse students and 22 BMLS students. The second data set were from the second year of nursing, BMLS and social educators. In total, 20 students worked in two groups, consisting of ten nurses, five BMLS and five social educator students. The IPE intervention was a combination of workshop and online IPE. Students’ online discussion and a submitted assignment were text analyzed.

**Result:** Analyzes of the online discussion showed that the first year students were less positive to the IPE intervention and were not nice to each other. The second year students were concerned about law and rules not being followed in the case. They focused on the need for collaborative practice, encourage each other and expressed themselves positive to take part of the IPE intervention. In the assignment, the first year students were concerned about the different role of health care workers, while the second year students point out barriers for interprofessional collaboration.

**Discussion:** Not surprisingly the second year students were more mature and seemed to be more aware of the need for collaborative practice. The first year students were more keen on to find out the role of their own and the other professions role.

**Keywords**
workshop and online interprofessional education, different cohorts

**Contact information**

Synnøve Hofseth Almås
sa@hials.no
Ålesund University College, Norway

Frøydis Vasset
fy@hials.no
Ålesund University College, Norway
19 Inter-professional collaborative learning; Learning about, from and with each other – across 6 different professions

Inger Taasen, Lena Andersson, Tove Skjerve-Nielsen, Elsa Nybø, Bente Kongsgård, Anne Kittelsen, Marthe Hafstad Augdahl and Nina Lühr

**Background:** Collaboration and cooperation has become the very structure of the design of welfare services (Report 47, 2008-2009). Inter-professional collaborative learning has become a more important educational policy aimed at meeting the patients’ needs for better inter-professional collaboration in health and social welfare services (Report 13, 2011-2012). The health care and social welfare professions share a value basis. The national curriculum has a common core that aims to contribute students gaining the necessary knowledge and understanding within a common framework for working as health and social welfare professionals. Up until now, there is little formalized contact between the professional study programs at Oslo and Akershus University College of Applied Sciences (HiOA). If students are going to understand why and how they can collaborate, they need to become acquainted with each other’s competences and skills in practice and they need to know about relationships, structures, communication and interaction. Barr et al (2005), emphasizes that in order to learn to collaborate, students need to learn with, from and about each other. Furthermore, it is important to make the point that the best place for inter-professional learning is in the field.

**Method:** Representatives from three districts in Oslo have developed a course together with teachers from six different health and social study program at HiOA. During the clinical placement, the students from the six study programs meet for a whole day seminar related to inter-professional collaboration. The course is designed according to action research/action learning principles. There have been five seminars per city district. 450 students and 40 supervisors have participated. The aim of the seminar has been for students to gain insight into each other’s professions, role and function as well as to gain experience with inter-professional collaborative learning to a client/patient in need of different health and social welfare services.

**Results:** In the presentation, we will focus on successful elements as well as challenges in facilitating inter-professional collaborative learning as part of community based practical placements.

**Keywords:**
Facilitating learning, inter-professional Collaboration, primary care

**Contact information**
Inger Taasen
inger.taasen@hioa.no
Oslo and Akershus University College, (HiOA - Institute for nurses), Norway

Lena Andersson
lena.andersson@hioa.no

Tove Skjerve-Nielsen
Tove.Skjerve-Nielsen@hioa.no
20 Problem based learning (PBL) including drama games as a motivating learning approach in interprofessional education (IPE)

Camusa Hatt

The university have years of experience with interprofessional student groups, from seven different health professions, learning through participating in an interprofessional module. Evaluations have shown a continuos massive challenge concerning the student’s motivation for learning and their level of participation in this three-week course of “Conflict management”.

To meet these challenges the university started a project within the frame of problembased learning and drama games. The idea was to develop strategies to motivate students and create a dynamic and stimulating learning environment and to test this pedagogic experiment within the course.

Methods

The hypothesis was that if the three-week course was carried out as a PBL course, and if the lecturers were prepared and supervised thoroughly for this method, the students’ motivation and participation would be higher than students participating in similar courses that were not carried out as problem-based learning courses.

The evaluation design was a combination of a quantitative questionnaire, answered by 256 students, 46 of these represented the 2 experimental classes where the three-week course was carried out as a problem-based learning course including drama games, the other 210 represented 6 comparison classes where the course was not carried out as a PBL course. The evaluation design also contained dialogue with the students in two experimental classes and qualitative interviews with the lecturers in the experimental classes. The interviews were analyzed by Kval 3 levels of analysis (Brinkman, J. & Kvale, S.(2009): Interview. Hans Reitzels Forlag)

Results

The results both supported the hypothesis concerning the students’ level of motivation and directed our attention towards the preparation and practice of the lecturers as an important aspect of carrying out a successful PBL course.

Among the students, there was a significantly higher level of satisfaction in the experimental classes than in the comparison classes, regarding 10 out of 12 questions asked about both academic achievement and satisfaction with the learning environment. In the qualitative part students from the two experimental classes highlighted that PBL was a challenging, but very satisfying method of study. Interviews with the lecturers supported these results and underlined the need for partner training and common preparation.

Conclusion

PBL and drama games can meet the challenges of lack of motivation and participation in interprofessional courses. These methods at the same time require a high level of motivation from the lecturers as well as from the students. Moreover, lecturers need supervision and partner training in learning practice.

Contact information

Camusa Hatt
caha@phmetropol.dk
Metropolitan University College, Copenhagen, Denmark
21 Crossing locations of enacting and observing simulations: ways of construction for interprofessional learning

Johanna Dahlberg, Sofia Nyström, Håkan Hult and Madeleine Abrandt Dahlgren

The global discourse for a sustainable and safe health care emphasizes the necessity of enhanced interprofessional collaboration and teamwork in health care. Increasing numbers of health care students participate in simulation-based education. However, due to the cost and logistics, not all students can take part in the simulation proper. They are assigned to be observers. This study explores how interprofessional collaboration in a simulated emergency situation is introduced and enacted, and how these enactments are made relevant for learning through observation. Empirical data consist of standardized video recordings of 17 simulations with medical and nursing student teams. Practice theory was used as a perspective on how the socio-material arrangements of the simulated scenario enabled participants to contribute different professional perspectives in their sayings and doings, and how these contributed to the emergence of interprofessional knowings in the situation. The findings suggest that interprofessional knowing in the simulation emerges as a connected or disconnected chain of actions through embodied, social, and material aspects. Furthermore, the students related to and enacted the manikin as a technical, physical/medical or a human body. These relatings and enactments enabled or disabled the collaboration in various ways. The emerging interprofessional knowing between the participants in the simulation room tended to be neglected in the crossing from the space of participation to the space of observation. The findings also showed how the location for observation, became a passive and normative space of judgment, of correct or incorrect behavior, instead of reflecting or identifying the interprofessional actions in the simulation room.

Keywords
simulation, interprofessional, socio-material, sayings-doings-relatings, observers

Contact information

Johanna Dahlberg
johanna.dahlberg@liu.se
Faculty of Health Sciences, Linköping University, Sweden

Sofia Nyström
sofia.nystrom@liu.se
Faculty of Health Sciences, Linköping University, Sweden

Håkan Hult
hakan.hult@liu.se
Faculty of Health Sciences, Linköping University, Sweden

Madeleine Abrandt Dahlgren
madeleine.abrandt.dahlgren@liu.se
Faculty of Health Sciences, Linköping University, Sweden
22 Undergraduate Interprofessional Simulation: an innovative pilot project

Jodie Gwenter

In January 2014, the University Hospital of South Manchester (UHSM) simulation suite became a hive of activity as it hosted an innovative Interprofessional Education (IPE) pilot project.

Hospital skills tutors from the Manchester Pharmacy School (MPS) and the Manchester Medical School (MMS) collaboratively developed and delivered a series of Interprofessional team training sessions to a group of third year undergraduates studying at the University of Manchester (UoM).

The overall aim of these sessions was to provide a novel learning opportunity for Undergraduate IPE that would help define the roles and responsibilities expected of a hospital pharmacist, doctor and nurse in clinical practice in a safe environment. Students were exposed to scenarios purposefully designed to draw out their ability to apply specific skills such as teamwork, delegation, leadership, problem-solving and recognising limitations in order to achieve the best outcome for their patient.

IPE forms a core General Pharmaceutical Council (GPhC) and General Medical Council (GMC) outcome, making the success of this project an excellent stepping stone for future simulated IPE.

Keywords:
Interprofessional
Simulation
Pharmacy
Medicine

Contact information

Jodie Gwenter
JGwenter82@hotmail.com
National Health Service / University of Manchester, United Kingdom
23 Integrating doctors and midwives in the art of delivery

Gloria Esegbona and Joy Palmer

Operative delivery of babies is a practical pursuit but training is challenging not just because of the complex variables involved. But also because system analysis often reveals inadequate training and poor communication between doctors and midwives as the key contributor to adverse outcomes. However, there were no comprehensive training courses and midwives and doctors often learnt in silos. And it was almost unheard of for midwives to be taught how an operative delivery was carried out as it was not something which was seen to be in their sphere of practice. So developing an interdisciplinary training course was not easy. The art of delivery course sought to change all of that with a creative process which aimed not just to develop technical skill but cultivate an environment that fosters engagement and communication (clinician-patient and clinician-clinician). In the course learning is aided by a play on the term art with learners given the license to be “artists” with the equivalent of paints and brushes called P’s and Q’s (3) on flashcards that are used to sprinkle the course with metaphor and stimulate dialogue. P’s being the mix of practical labour, maternal and fetal variables which often begin with the letter P. Whilst Aristotle’s “rule of 3’s” is capitalized on in the design of learning objectives, presentation delivery and course structure. E.g., the learning objectives are formed by the letters in art - 3 a’s, 3 r’s and 3 t’s are essentially triangulated yet orthogonal objectives introduced from multiple perspectives to promote complete understanding of the complexity of OVD and create a scaffold that characterizes learning as a self-regulated and constructive process. The P’s and 3’s cover the activities needed frequently in practice and are used to headline key topics under each objective. To date over 300 midwives and doctors have been taught with positive evaluations in over 90%.

Keywords

art interprofessional learning midwives doctors

Contact information

Gloria Esegbona
gesegbona@aol.com
The ART of OVD. United Kingdom
1 Physiotherapy students learn IPL in a clinical setting

Malin Ortfelt, Belinda Sarlija and Charlotte Kaijser

Background The Physiotherapy program at Karolinska Institute is a three year course, equivalent to 180 ECTS and corresponding to the 1st Bologna cycle. The study program covers physiotherapy and research methodology, anatomy, physiology, psychology and medical subjects. The first clinical rotation takes place in the third semester and IPL is implemented from the beginning. Fysioterapikliniken at Karolinska Universitetssjukhuset, Huddinge, accepts 16 students each semester.

Setting The clinical rotation in the third semester lasts for six weeks. A team of three clinical lecturers introduce the students to the clinical work during the first week. During the clinical rotation the following five weeks each student will be assigned to a clinical supervisor, who together with the three clinical lecturers will be responsible for ongoing instruction and supervision. The students have challenges for facilitating inter-professional learning.

Method One day during placement, each physiotherapy student accompanies a nurse or a health care assistant in their daily work. The day ends with a seminar led by clinical lecturers and a nurse. The students reflect on the department and also on the differences in the professions. All students conduct an inter-professional task. Together with a student from another healthcare profession (e.g. occupational therapist, nurse, doctor, speech pathologist or dietician) the students interact around a selected moment (medical history, status, instruction, others). In the daily work the students participate in multidisciplinary rounds and interact with other healthcare professionals.

Conclusions Our experience is that most students find inter-professional learning useful and that it helps them to identify their own professional role. Improved understanding for your own profession also improves the understanding for other professions. The students reflect on what they have learned together with other professionals and we find they develop interpersonal and teamwork skills and gain knowledge of how other professionals work.

Keywords
Physiotherapy, clinical education, IPL

Contact information
Malin Ortfelt
malin.ortfelt@karolinska.se
Karolinska Institutet, Sweden

Belinda Sarlija
belinda.sarlija@karolinska.se
Karolinska Institutet, Sweden

Charlotte Kaijser
charlotte.kaijser@karolinska.se
Karolinska Institutet, Sweden
2 Interprofessional learning environment - Physiotherapy- and nursing students’ module 12

Pernille Kjaer Svendsen, Anne Nimb and Lotte Dahl

Introduction Physiotherapy and nursing students will learn from each other with focus on patient centered care. Students will achieve a better understanding of each other’s professional skills and give students the opportunity to reflect upon their own professional identity.

Background Evidence shows interprofessional collaboration generates satisfied patients and relatives in addition to improved patient safety. Patients and relatives expect collaboration despite professional boundaries and occasionally professionals to cross these boundaries.

Method 2 student units (two physiotherapy and two nursing students) in the Department of Orthopaedic Surgery. 4 days with inter-professional learning and collaboration concerning patient care and physiotherapy treatment in focus. Each of the four days end with mutual reflection between students, clinical supervisors and clinical pregraduate teachers from both professions. The project started in 2010 and the course has been completed successfully six times involving 22 students.

Results The course has received positive evaluation in verbal and written reports. One student stated; "I think this has enhanced my professional identity, as I was expected to explain, show, describe and involve a physiotherapy student in what it is like to be a nurse". Another student said; "I have become more aware of why I do things the way I do".

Contact information

Pernille Kjaer Svendsen
pernille.kjaer.svendsen@regionh.dk
Rigshospitalet, Copenhagen, Denmark

Anne Nimb
anne.nimb@regionh.dk
Rigshospitalet, Copenhagen, Denmark

Lotte Dahl
lotte.dahl@regionh.dk
Rigshospitalet, Copenhagen, Denmark
3 IT support for students and tutors in Primary Healthcare to facilitate self-directed learning and the implementation of interprofessional education

Eva Toth-Pal, Katarina Rolfhamre, Marina Reuterswärd and Pontus Järlund

**Background:** Interprofessional education (IPE) is a valuable supplement in clinical training in order to stimulate students’ learning and develop their skills. IPE in Primary Healthcare (PHC) education in Stockholm is still rare. Dissemination and implementation of new teaching methods in PHC is hindered by the geographical distances which makes it difficult for groups of tutors and/or students to meet. IT technology is a promising tool for overcoming this problem. One of the main tasks for the newly established Academic Primary Healthcare Centres (AHC) in Stockholm is to implement IPE in PHC.

**Objective:** To create and evaluate an interactive virtual tool for students and tutors within Liljeholmens AHC network. The virtual tool will provide IPE learning activities and a learning portfolio for students in order to facilitate the implementation of IPE in everyday clinical training and to stimulate self-directed learning.

**Methods:** We have chosen a web 2.0 environment (KI Commons), administered by the Library at Karolinska Institutet to create the web site. The content is now under development. An interprofessional group of tutors is creating and testing IPE activities in their clinical teaching. The result will be a set of activities adapted to the web environment and supported by documents, pictures and videos. It can then be immediately applied by tutors and students in the AHC network in their IPE activities and portfolios. The web site is interactive and allows all members to upload material and to discuss their experiences in order to facilitate exchange of ideas and the development of new IPE activities. For evaluation, tutors and students will be interviewed and the usage of the site will be monitored.

**Implications:** IT technology is a promising tool that can contribute to the development of clinical training in PHC and to the implementation of new pedagogical methods such as IPE.

**Keywords**
Interprofessional education Primary Healthcare IT technology

**Contact information**
Eva Toth-Pal
evatothpal@gmail.com
Liljeholmens AVC, Sweden

Katarina Rolfhamre
katarina.rolfhamre@sll.se
Liljeholmens AVC, Sweden

Marina Reuterswärd
marina.reutersward@ki.se
Karolinska Institutet, Dept NVS, Sweden

Pontus Järlund
pontus.jarlund@sll.se Liljeholmens AVC, Sweden
Interprofessional Communication in ever changing health system

Jackline Sarah MacHaria

**Background:** According to HSCIC (2014), the number of complaints in the NHS continue to be on the rise; the total number of complaints from 2011-12 has risen from 107,259 to 109,316 in 2012-13. This is a noted increase of 1.9% complaints within a one year period. Consecutively, the highest numbers of complaint made were related to communication and sharing information with the patient which was recorded at 11606 complaints, with a 5.6% from the previous year 2011-12. Further analysis from the NHS Ombudsman highlights that 19% of the complaints related to communication were instances where the patients had poor explanations regarding their treatment (Parliamentary and Health Service Ombudsman, 2013). This clearly identifies that there is gap within the health care system that needs to be addressed as part of improving communication models within the healthcare system.

**Objective:** The purpose of the information presented in the poster is to explore issues pertaining to inter-professional communication in health care system.

**Methods:** A literature review has been carried to explore communication models in health care. CINAHL, MEDLINE and Psy-ARTICLES databases have been used to identify the application of communication models in health care settings. A systematic review was used to analyse the findings.

**Results:** Systematic review identified 3 themes of: 1. Training and education: This can increase self-efficacy which can translate to better patient participation. 2. Patient centred care: Patient involvement is largely related to professional engagement. 3. Emotional communication: This poses barriers in health care practice. Implications and limitations: The notion of communication remains a dilemma that is greatly influenced by individual demographics, personality and socio economic factors. Despite of such challenges it is valid to recommend that effective communication is the ultimate key to patient satisfaction.


**Keywords**
Inter-professional communication, communication models, change models, team-based health care delivery

**Contact information**
Jackline Sarah MacHaria
jsmach@essex.ac.uk
University of Essex, Colchester, Essex, United Kingdom
High school peer tutor training - Innovative approach to learn and empower skills for future health choices

Tiina Tervaskanto-Mäentausta and Ulla-Maija Seppänen,

**Background** International exchange students together with Finnish students (n=12) from different degree programs carried out on interprofessional project in collaboration with Oulu University of Applied Sciences (Oamk) and all the high schools of the city of Oulu. The model to the tutor education has piloted and further developed in collaboration with the high school counselors of Oulu and Oamk. The aim of the project was to train the high school students to become tutors for the new arrival high school students in the next semester. Peer tutors are in an important role promoting health and wellbeing of their school mates. The aim of the training was that the high school students learn skills and methods to be a tutor in order to support wellbeing of the others.

**Implementation** The method of the study course was a project. The tasks were to plan, carry out and evaluate the project. Facebook group was opened as a working platform. Participants were 150 voluntary high school students from 11 schools. The project had two parts. The aim of the first part was grouping: getting to know each other, to trust and to solve problematic situations, what the tutor students may face in real life as tutors. The tutor students were divided in four groups. Each session took 3 hours. The second part was a health and wellbeing day for all of the tutor students. It was organized in seven different “stations” and subjects. The subjects were chosen according to the results of the national School health survey.

**Results** Evaluation of the participants was collected after each grouping session and the health and wellbeing day. The students gave self-evaluation of their learning as well. According to the feedback, the tutors got lot of skills and tools to be a tutor. They trained solving problematic situations and take in talk about difficult issues. In general the project was evaluated successful and positive. The students of Ouas learned about project work and working with the adolescent. They learned working as an interprofessional team and sharing responsibilities. They also learned to know about different health and social professions, health promotion and cultures.

**Keywords**

project learning, interprofessional, prevention of health and wellbeing, education on different levels

**Contact information**

Tiina Tervaskanto-Mäentausta
tiina.tervaskanto-maentausta@oamk.fi
Oulu University of Applied Sciences, School of Health and Social Care, Finland

Ulla-Maija Seppänen
ulla-maija.seppanen@oamk.fi
Oulu University of Applied Sciences, School of Health and Social Care, Finland
Interprofessional education, IPE, at a thoracic surgery ward

Henrik Pettersson

**Background:** Continuous positive airway pressure, CPAP, is a non-invasive method to treat postoperative atelectasis. At Karolinska University Hospital, Thoracic clinics, Sweden, the physician prescribe CPAP but the physiotherapist, PT, starts the treatment and the nursing staff continue. In order to improve knowledge, compliance and safety of treatments the PT has recurrent education sessions with nurses and assistant nurses. The education has not been successful because the different professions seems to have different priorities. To investigate whether an interprofessional learning activity, directed towards all staff; i.e. physicians, nurses, assistant nurses and PTs, would lead to a learning situation where the professions learn with, from and about each other with the aim to improve collaboration and the quality of performed CPAP treatments, a pilot study was initiated. The aim of the study was to: ‘Facilitating interaction, exchange and co-reflections as the participating professions compare perceptions, values, roles, responsibilities, expertise and experience’, ‘Gain a higher level of quality in delivered CPAP treatments’ and ‘Acquire a higher degree of adherence of prescribed CPAP treatments’.

**Methods:** In a pilot study an interprofessional learning activity which included theoretical aspects, practical exercises, patient cases and reflection was led by the PT. Staff at the ward were mixed in groups (physicians, nurses, assistant nurses and students) and participated in a 90 minutes long activity. Evaluation was done by the PT and chief nurse through conversation with staff and review of CPAP records.

**Results:** A higher understanding of the participating professionals’ skills, improved quality of care and greater compliance in the prescribed ordination were seen after the interprofessional learning activity.

**Implications:** This pilot study indicated that an interprofessional learning activity improved professional understanding, skill, adherence and safety at CPAP treatments in a thoracic ward.

**Contact information**

Henrik Pettersson
henrik.pettersson@karolinska.se
Karolinska University Hospital, Stockholm, Sweden
7 Hall of Mirrors: Reflecting on reflections during an interprofessional placement

Constantina Lomi and Rene Ballnus

Background
Reflective capacity is regarded by many as an essential characteristic for professional competence. Interprofessional education offers opportunities for “learning by doing” as well as for reflective learning. These aspects of learning are considered to be of major importance in the interprofessional educational context. Especially reflective learning is considered to have a potentially fundamental role to play in critical aspects of interprofessional education. Various models and strategies have been proposed for employing reflection in interprofessional education.

Objectives
Better understanding of a 30 minute/day reflection component in an interprofessional placement.

Methods
1) Field observations during a two week interprofessional placement at Karolinska University Hospital,
2) Literature search and
3) Participant-observer reflections.

Results and implications
The following observations were presented at a meeting with the interprofessional team of clinical tutors:

✓ Evidence of supportive group process
✓ Evidence for student engagement in problem solving
✓ Evidence for positive learning environment and support from the clinical tutors.
✓ Variation in content during the reflection meetings with different clinical tutors.
✓ Need for common understanding/definition of the concept of reflection
✓ Need for alignment between the intended learning outcomes, the learning activities and the assessment regarding reflection
✓ Discontinuity in the process
✓ Need for reflection on interprofessional learning activities

The following challenges were presented/suggested:
✓ Consensus regarding definition of reflection and theoretical framework
✓ Develop constructive alignment
✓ Support continuity in the reflection process.
✓ Focus on reflection on interprofessional learning activities
✓ Integrate patient perspective in the reflection process

A list of relevant literature was suggested to the interprofessional team of clinical tutors for inspiration (relevant books, articles as well as material from the internet).

Contact information
Constantina Lomi
constantina.lomi@karolinska.se
Karolinska University Hospital, Sweden
8 Reflection as a tool for learning interprofessional competence

Anki Näsström

Method
Interprofessional learning activity in Primary Health Care, home visit. Participants were two physiotherapist students, semester 5, and one nurse student, semester 6. Supervisor was a speech therapist, working daily in a rehabilitation team. The patient was a man who is wheelchair bound and has aphasia from stroke.

Background
To increase students' preconceptions, they got written information about IPL, purpose and learning outcome of the learning activity to read before the home visit. Time was allocated before and after the home visit for planning and summary of the patient’s situation and needs.

Learning outcome
The learning outcome for the activity was the students’ ability to reflect and discuss what other professions they might need to collaborate with to give the patient the best rehabilitation and nursing.

Result
Allocated time for reflection and discussion before and after the activity was the main success factor for student learning. Another advantage was that the supervisor work in a team and collaborates with different professions across the continuum of care, in both the county and the municipality. The activity took place in the patient's home environment which made the patient's needs well visualized. Home environment also did the patient feel safe and contributed to the good interaction between him and the students.
Some of the difficulties in implementing the activity were time constraint for all participants and that IPL was not compulsory for the students during the clinical placement.
Assessment of learning outcome was subjective when not measuring instrument was used to evaluate learning outcomes.

Conclusion
It would have been desirable with more knowledge in supervising and assessing students in IPL and my opinion is that education concerning IPE / IPL is needed at all levels within the community, from supervisor to executive.

Keywords
IPL, Primary Health Care, home visit, reflection

Contact information
Anki Näsström
anki.nasstrom@sll.se  anki_5825@hotmail.com
Tallhöjden Rehab, Neuroteam Södertälje, Sweden
9 Team building training – Facilitating Interprofessional teams – a continuing process for quality of care

Uffe Hylin, Margaretha Forsberg Larm, Marie Sjöstedt and Sari Ponzer

Background
Health care is managed by professionals who often work in teams even if most students are still educated in their own profession. Interprofessional learning (IPL) activities have become more common, but to guide the students to learn from, with and about each other the facilitators need specific competence.

Learning together promotes teamwork and aims also to enhance patient safety and good patient care. At Karolinska Institutet, Stockholm, Sweden, all programs have IPE learning outcomes, and health care students from 4 programs participate in a 2-week mandatory course at a clinical interprofessional training ward (IPTW).

Experiences from 15 years interprofessional learning activities at Karolinska Institutet illustrate how IPE/IPL can be developed, implemented, managed and sustained both for undergraduate students and for students during specialist training.

Objectives
The objectives with the workshop are to get experience and understanding of some methods for how students from different health care educations can be facilitated in their development towards a well working team.

Method
The workshop will be based on the team building training the IPE students at Karolinska Institutet get. After a short overview and a presentation of theoretical background, participants will be divided in smaller groups for the practical team building exercises. After each exercise, the performance and result will be discussed. Also prerequisites and conditions for implementation in different settings will be discussed. Practical training and small group discussions will be important parts of the workshop.

We would also like to discuss the value of team building activities as a part of IPE and give examples of how we work with assessment of team competence.

Results
The team building training improves teamwork and collaboration in the student teams at an interprofessional training ward. After team building training the students are more interested in each other and in each others’ work, the team members communicate better, share work and solve problems in the teams before asking the facilitators.

Contact information
Uffe Hylin
uffe.hylin@sodersjukhuset.se
Dept of clinical science and education Karolinska Institutet, Södersjukhuset
To facilitate interprofessional learning (IPL) at the academic health care centers in Stockholm County, Sweden

Maria Kvarnström, Margaretha Risén and Ulla Thörnblom

Background
In Stockholm County Academic health care centres have been established, aiming to 1) strengthen clinical education, 2) increase patient-orientated research and 3) strengthen the interprofessional education (IPE) for the team work thus contributing to a learning organization. The desired outcomes were an increased number of students from different professions, research and the use of resulting research in the clinical work as well as safer health care.

The Centre for Clinical Education (CCE) has the overall responsibility for coordinating and contributing to the quality of clinical education in higher education in Stockholm. In accordance with that, one of the main areas of CCE is to promote IPE.

Objectives
To facilitate the interprofessional learning environment at the academic health care centers.

Methods and activities
The facilitation was designed to promote IPE on different levels in the organization. Guidelines for four interprofessional learning activities, homecare visit, clinical visit, case seminar and shadowing, were developed. Initially a collaborative introductory workshop "how to start IPE" was performed with the managers of the care units, the coordinators of the health care centres and the student managers.

At this workshop the health care centres described their future needs for education and support and the guidelines were introduced. This was followed up by local seminars and workshops for e.g. the supervisors depending on the requirements from each centre.

The performance of the suggested learning activities was evaluated by the student managers at the health care centres using a questionnaire including questions about the use of the interprofessional learning activities and suggestions for improvements of the guidelines for the activities as well as if there were any problems performing the activities.

Results
The interprofessional learning activities were tried out during autumn 2012, and included the following activities; Home visits, Clinical visits, Case seminars and Shadowing. The attending students were the professions physiotherapists, occupational therapists, nurses, physicians, district nurses, chiropractor and enrolled nurse.

The guidelines were perceived useful and additional activities would be appreciated.

The major difficulties seemed to be due to logistics of the clinical placements and to engage the tutors. It seems important that the students and the tutors are well informed about the aim of IPE.

Conclusion
Guidelines for suggested interprofessional learning activities have been presented and published online. The facilitating of IPE was evaluated and the result revealed how IPL was performed including participation of professions and suggested improvement for the guidelines.

Contact information
Maria Kvarnström
Maria.kvarnstrom@ki.se
Centre for Clinical Education (CCE), Stockholm
11 The controversy about the controversial belts – ground for interprofessional learning

Tuija Viking

Background
A project team was set up in 2010 by the Swedish Psychiatric Association (SPF) to create clinical guidelines for compulsory psychiatric treatment. The team was an interprofessional constellation of expertise from nursing, medicine and social science. Initially, and when the team on order on SPF were writing a consultation response to a public commission on Psychiatric legislation, conflicting standpoints on the use of mobile belts, a sort of waist belts, came to the fore among the team members. However, these conflicts originates in an old controversy were arguments pro- and against the use of these belts were supported by scientific, legal and ethical arguments by two groups of narrative practitioners, compulsory psychiatric care practice and supervisory practice. This study is the stories of the tensions – and the narrative environments, interacting processer, and the learning processes that follow by that.

Methodology and activities
The study combines theoretical insights from ideas about interprofessional learning (IPL) with insights from controversy studies. Where the former has come to emphasize experiential learning and the importance of collaboration across professional boundaries in order to better respond to patient needs from a holistic point of view, controversy studies make us aware of other dimensions in terms of interaction and patient perspective. Here, attention is given to situations where professionals have different perceptions of a phenomenon, although shared evidences. The boundary work, which arise from such controversies, leads to interaction processes with conflicting argumentation, often, related to a patient perspective.

Narrative method. 9 interviews, one dropout. Meeting protocol and documentation of team work 2010-2013 and selected relevant reports. Interactional data analysis.

Results
- Conflictual views considering ‘the controversial belts’ was found to be about patient safety, justified on the one hand on scientific findings, and on the other hand on legal grounds and circumstances.
- The course of the controversy itself, that is problem-based, uncertain, but deliberately exaggerated by interest that allows contradictions bridged by compromise of various kind, stimulates and gives direction to the interaction processes of IPL.

Conclusion
Focus on controversy gives new insights about IPL as a successful method for dealing with controversial issues. Through its focus on contradictions, joint problem formulations, review of each other’s arguments, feedback and reflection through practical and theoretical cases, both the complexity and vulnerability of the meaning of ethical standpoints from a patient perspective can be shown.

Contact information
Tuija Viking
Tuija.viking@hv.se
University West, Trollhättan, Sweden
12 Using art to achieve Interprofessional Learning

Gloria Esegbona, Joy Palmer and Hiba ElHassan

art is a one day course which has run since September 2012 and centres on promoting interprofessional learning in OVD. The impetus emerged from concerns for patient safety. Since September 2012 thirty courses have been delivered in the UK and Africa mainly – eleven of which have been interprofessional consisting of Drs and midwives of all levels.

In order to reduce the complexity of the topic and training such diverse groups the art course imbues a creative process which aims to develop not just technical skill, but cultivate an environment of interdisciplinary quality by using a simple innovative user interface of learning objectives of 3 a’s, 3 r’s and 3 t’s which cover the activities needed frequently in practice. Learners are given a, r and t flashcards that serve as prompts during interdisciplinary breakout sessions to tackle cases and problem based learning scenarios. As well as the equivalent of paints and brushes called P’s and Q’s (3) – a mix of practical maternal and fetal used to headline key points under each art objective. An important P is called POSITIONN, an innovative evidenced-based mnemonic which serves as a vector through which artists learn from and about one another as the term prompts learners to critically reflect on their “position and that of others. But the real interdisciplinary learning comes because there is a real play on the term art where learners are referred to as “artists” and asked to interact and present their solutions/ results to cases in the form of an art piece. Enabling them to freely express thoughts, feelings and ideas in a safe non-threatening haven unburdened by rules and norms.

Giving professional clinicians the license to be “artists” and the tools (P’s and 3’s and playdough! etc) with which to do it has spawned some remarkable results. There has been a greater appreciation of interdisciplinary communication, self-awareness and empathy with > 95% positive feedback and testimonials including:

“Lovely to have opportunity to learn alongside doctors and a great change to have someone advocating for the role of midwives and importance of teamwork.”

"Nice to know how my colleagues think and make the decisions they do"

“I feel my practice is safer”

“Lovely to have mix of grades & midwives. Thankyou so much!!”

“Very useful and encourages inter professional communication and support in the multidisciplinary team”

“Now we can know our stuff to work alongside doctors”

Contact information
Dr Gloria Esegbona - Art of OVD Director
gesegbona@aol.com
Joy Palmer - University of Bedfordshire
Hiba ElHassan - Queen Charlottes Hospital, London
13 Interprofessional education and collaborative practice in Criminal Justice system

Ali Yildirim and Ercan Balcioğlu

The methodological approach of this research was qualitative. Prior to data collection a pilot study was undertaken to evaluate and refine the data collection methods. The data is collected through the structured interviews. The researchers asked the participants 10 close questions about the Interprofessional Collaborative Practice (IPCP) and IPE Thematic analyses technics use for analysis. The result indicated that the professionals who work in Criminal justice system do not have enough knowledge and opinion about the IPCP and IPE. High percentage of them thinks that IPE is useful for their pre-registration course and they think that IPCP can help to communication skills and interprofessional relations. Also it will be positive change the tradition justice system to the modern system.

Keywords
criminal justice system, interprofessional education, interprofessional collaborative practice

Contact information

Ali Yildirim
yildirimali@hotmail.co.uk
De Montfort University, United Kingdom

Ercan Balcioğlu
ebalcioğlu@gmail.com
Leicester University, United Kingdom
Centre for Clinical Education (CCE)
High competence to handle the demands of today and preparedness to meet the challenges of tomorrow – healthcare in collaboration with universities and university colleges
CCE has the overall responsibility for quality and coordination of clinical education at the university level throughout the healthcare system in the Stockholm County.
CCE contributes to the students of today becoming competent coworkers of tomorrow.
CCE strives to support and develop quality in four areas; Interprofessional Education, Faculty development in clinical education, Pedagogical development and research, and Coordination and quality assurance of clinical placements.
For additional information about the activities of CCE; cku.ki.se