The World Health Organisation Framework for Action on Interprofessional Education and Collaborative Practice

This 64-page document produced in 2010 describes the current status of interprofessional collaboration around the world and provides a series of practical strategies that policy-makers can apply within their local health system.

It offers examples of IPE in action in hospital and community settings. The framework emphasises the need for educator vision and commitment, and the importance of supportive governance from health professional organisations.

For a copy of the document visit the WHO website at: http://www.who.int/hfr/resources/framework_action/en/

Stories from us

Educator's story

"With my student and I, it sparked a good discussion about peoples' roles in the workplace, and how to manage that communication back and forth better. We spent quite a while talking about that and the fact that when things go wrong, it's often because there's a lack of understanding of the other guy's job and if you had some idea of what they were going through to try and streamline things together, how all the pieces fit, you'd have a more cohesive workplace."

Nurse Preceptor (WHO framework for action)

Student's story

"When we participated in an interprofessional activity on managing someone with a chronic illness, what I was most amazed at is the focus of each of our health team members from their different disciplines. The nurses were really focussed on patient comfort and that's something has never really come into my mind. I did think, 'Is he in pain?' Just give him some analgesics.' But they'd say, 'Maybe you might want to give him a blanket or position him in a different way'. Or like when you give the patient oxygen, you just give him oxygen. The nurses would say, 'Well, if we did that, we'd have to sit him up.' I'm like, 'Well, yes, I guess you would.' It's not only giving the patient this medication. There's actually a method and a technique that has to go with that. The pharmacy student, she would say, 'I've got to think of the drug interactions and I've got to think of how to educate this patient on how to use this particular medication.' So okay, you can't just give them the medication.

"It made me realise, 'Okay don't just think full stop'. You have to think, okay, the patient has to actually deal with this new medication and with this new treatment and you have to actually consider what the impact is on them. That is what I've learned most from these activities."

Medical student, 2006

Collaborative Education

Readers interested in interprofessional education and interprofessional practice may encounter a confusing array of terms and buzz words. In this, our twelfth issue of REd, we take a look at some of these commonly used definitions and their intended meanings.

We invite you to reflect on the diversity of health care interactions and shared decision making activities that occur as part of everyday work with patients and professional colleagues in your clinical setting. We also encourage you to 'look beyond' the definitional complexities of interprofessional learning to consider how, as educators and clinical supervisors, we can help students to develop the confidence and capacities to contribute what they have to offer to situations and colleagues.

About REd

REd is published four times a year by the North West Rural Medical Education Unit of the Monash University School of Rural Health. It provides resources and practical tools for clinical educators. Back issues are available. Phone (03) 5440 9000 or see our web site: www.med.monash.edu.au/med/srh/medical-education/resources.html

If you would like each issue of REd sent directly to you, contact pam.harvey@monash.edu

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In Focus … interprofessional learning in action

Much has been written about ‘interprofessional education’ and ‘interprofessional practice’ and ‘interdisciplinary teamwork’ in the health field. While the need for interprofessional collaborative practice is widely acknowledged, the practical how to’s are more complex.

Collaborative Learning

Creating learning environments that encourage holistic thinking, professional collaboration and meaningful participation is part of it. Recognising the social nature of the decision-making that occurs among health professionals, in their work with patients, is another component. This is not to deny individual knowledge and expertise. It is important to look at how, why and when different health professional perspectives and contributions are ‘called on’ – or not; as the case may be.

Recent research suggests that more holistic and dynamic models of interprofessional collaborative practice are needed. These studies recognize the multiple sites of communication and solution generation that shape clinical action. Interactions among the ‘health team’ occur opportunistically and in formal team working arrangements. This can occur in case discussions, quick clinical clarifications, ward meetings or debriefs with colleagues and in shared care planning and health assessments. These discussions take place in response to the efforts of health practitioners to improve patient care as they go about providing care. There is no ‘one size fits all’ for interprofessional learning and collaborative practice. One challenge is to ensure that interprofessional practice is not just viewed as a logistical coordination exercise. Putting too much emphasis on team ‘co-ordination’ as the main mechanism for working together may not capture the diversity and complexity of clinical thinking in action. It may also overlook the shared learning and decision-making that occurs over time in the activities of clinical work itself.


Towards interprofessional practice (IPP)

The definitions surrounding IPP are often used interchangeably but they can mean quite different things. Here’s a selection of terms to base your practice on:

1. Collaborative Practice: an interprofessional process for communication and decision making that enables the distinctive and shared knowledge and skills of health care providers to influence clinical patient care. Facilitates the achievement of goals that cannot be reached when individual professionals act on their own.
2. Interprofessional Education: (IPE) Used mainly to refer to undergraduate education situations that involve students from two or more health professions learning with, from and about each other to enable effective collaboration and improve the quality of health care.
3. Interprofessional Learning: Learning that arises from interaction between members of two or more professions (including students). Values lifelong learning principles and active learning processes between different professional cultures and disciplines. Acknowledges both formal and informal learning opportunities and emphasizes the development of health care relationships.
4. Interprofessional Practice: The collaborative interdependent use of shared expertise to accomplish common health care goals. Implies an active relationship between two or more health professionals who work together with patients/clients to optimize health care.

Multi-professional Education: when students from two or more professions learn alongside one another – involves parallel, rather than, interactive learning. (eg. sharing the same chemistry or biology tutorials)

Trans-disciplinary: May be used to describe overlaps in professional boundaries where health professionals take on aspects of each others roles in the absence of the specific health professional.

5. Op. Cit. CAIPE website

If health workers are expected to work together and share expertise in a team environment, it makes sense that their education and training should prepare them for this type of working environment.

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