The Interprofessional Education through Rural Partnerships Project

Background
Models of care embracing interprofessional collaboration have demonstrated improved outcomes for patients and families and have had positive impacts on the work environment of health professionals (AIPHE, 2011). To prepare future health professionals for this collaborative approach to care, it is beneficial to expose and immerse students in these experiences throughout their education.

A collaborative approach to patient care is common in rural communities, due to large patient caseloads and the general shortage of rural healthcare professionals (Bourke et al., 2004). Previous research on interprofessional education (IPE) in rural settings has shown to be successful in providing exposure to a rural working environment, influencing the attitudes and knowledge relating to collaborative practice of students, and may also improve recruitment and retention of rural health professionals (Cragg, Hirsh, Jelley, and Barnes, 2010).

Project Description
The underlying principle of the Interprofessional Education through Rural Partnerships Project is to work with communities in developing and implementing sustainable IPE initiatives that meet both the needs of the educational programs and the community. Partnerships are developed between the health sciences programs and the rural communities to plan, implement and evaluate IPE initiatives. An important component of this initiative is hiring an IPE Lead from the rural community. This IPE Lead works with a team from the health sciences colleges to provide community leadership in the development, implementation and evaluation of the various IPE activities.

The pilot study of the rural IPE project took place in Humboldt, Saskatchewan and was funded jointly through a grant from the Saskatchewan Academic Health Sciences Network and the Council of Health Sciences Deans at the University of Saskatchewan. To date, 75 students from Medicine, Nursing, Pharmacy, Nutrition and Physical Therapy have participated in the project.

In this project, it was important to integrate the Canadian Interprofessional Health Collaborative (CIHC) competencies in all experiences. Students reported the IPE experiences had a positive impact on their knowledge and understanding of each other’s practice, the value of teamwork, the importance of effective communication and their attitude towards interprofessional practice. In addition, the student’s familiarity and understanding of rural health and rural practice was enhanced as a result of this experience.

Health Science students and rural preceptors have also identified the need for a central repository for general community information, academic resources, a venue for communication that is easily accessible and cost effective for current and prospective students and preceptors. A potential solution
that has been identified is the establishment of a website that would include orientation information to the community and IPE experience, support information for IPE activities, resources on rural health, potential accommodations, etc. Many of these resources have been developed, but access is limited and students often do not receive them until they have begun their experiential learning. In addition to supporting the students, preceptors and university partners, a website would also become a viable means to enhance recruitment of students to this rural interprofessional experiential initiative. The more students who participate in rural experiential learning, the more likely these students will work as health professionals in rural settings.

Through the support from the University of Saskatchewan Community Engaged Experiential Learning Grant, individuals from the Colleges of Medicine, Nursing, Pharmacy and Nutrition and School of Physical Therapy worked with professionals and health sciences students in the rural community to develop a website. Additional communities are requesting to replicate the project in their community and as they become involved, they will be added to the website.

Incorporating IPE into the clinical environment requires a tremendous amount of planning, but in the end, students’ end up with three learning opportunities through the rural community experience:

- **Interprofessional patient rounds**
  - Health care professionals and students make rounds together where they meet with patients and families to review and discuss care plans

- **Case care sessions**
  - Include health sciences students, instructors and preceptors, a patient and family member. The team comes together to learn the patient and family story directly from the patient or family member. The collaborative team, including the patient and family, then discuss how the plan of care unfolded. The contributions of each health professional and student are discussed, including an opportunity to examine various IPE competencies (role clarification, interprofessional communication, team functioning, patient centered care, team conflict).

- **Walk a Mile experience**
  - Health science students spend time with health professionals using a guided reflected exercise that prompts students to ask questions about the health professionals’ role and learn about collaborative practice.

Additional IPE projects include:

- The creation of an orientation manual for all health sciences students coming to Humboldt
- The establishment of an electronic calendar shared between all health sciences preceptors

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