

## Interprofessional Education (IPE)

### For the purpose of this evidence brief, IPE is defined as:

Interprofessional education (IPE) occurs when students from the health professions and related disciplines learn together about the concepts of health care and the provision of health care services toward improving the effectiveness and the quality of health care.

### Effects on Practice

- Interest in Interprofessional Education (IPE) in the United States has grown over the past two decades as research has emerged suggesting that greater levels of collaboration between health professionals, especially between nurses and physicians, improves quality of care and patient outcomes (Barr, 2002; Barnsteiner et al., 2007).
- A longitudinal study of the effect of two-week IPE modules integrated into the undergraduate health and human services curricula from 2005 to 2007 found variation in student satisfaction with IPE modules between the four participating disciplines. Medical students gave the lowest appraisal, followed by students of nursing, pharmacy, and social work. No significant change was observed in student attitudes toward IPE or interprofessional teamwork in general (Curran et al., 2010).
- In an international meta-analysis of studies where IPE was introduced into an educational or care setting, researchers observed generally positive results from the program, including improved teamwork, decreased clinical error rates, greater patient education, and increased overall team competency. The researchers note, however, that few studies (6) fit the inclusion criteria, and that heterogeneity between study designs and outcome metrics make direct comparison of results difficult (Reeves et al., 2009).
- A systematic review of 21 studies of IPE initiatives worldwide between 1981 and 2005 concluded that: capable staff facilitation is a necessary component of effective IPE and that IPE programs that utilize real or simulated practice environments have greater success in achieving collaborative goals. This review also found that IPE is generally well-received by participants and can develop the skills necessary for collaborative work. Studies of the impact of IPE on the perceptions and attitudes of one group of practitioners towards another were inconclusive. While the majority of studies found IPE to improve negative professional perceptions, some reported instances of worsening perceptions at the end of the study period (Hammick et al., 2007).

### References:

Barnsteiner, J.H., Disch, J.M., Hall, L., et al. "Promoting Interprofessional Education," *Nursing Outlook*, May/June 2007, Vol. 55, No. 3, pp. 144-50.

Barr, H. "Interprofessional Education: Today, Yesterday and Tomorrow," *The UK Centre for the Advancement of Interprofessional Education*, March 2002. Available at: <http://westminsterresearch.wmin.ac.uk/2506/> (last accessed January 11, 2011).

Curran, V.R., Sharpe, D., Flynn, K., et al. "A Longitudinal Study of the Effects of an Interprofessional Education Curriculum on Student Satisfaction and Attitudes Towards Interprofessional Teamwork and Education," *Journal of Interprofessional Care*, January 2010, Vol. 24, No. 1, pp. 41-52.

Hammick, M., Freeth, D., Koppel, I., et al. "A Best Evidence Systematic Review of Interprofessional Education," *Medical Teacher*, October 2009, Vol. 28, No. 8, pp. 735-51.

Reeves, S. "An Overview of Continuing Interprofessional Education," *Journal of Continuing Education in the Health Professions*, Summer 2009, Vol. 29, No. 3, pp. 142-46.