

## Evidence and IPE

- Barker, K. K., & Oandasan, I. (2005). Interprofessional care review with medical residents: Lessons learned, tensions aired--a pilot study. *Journal of Interprofessional Care, 19*(3), 207-214.  
doi:10.1080/13561820500138693  
Integrated interprofessional care teams are the focus of Canadian and American recommendations about the future of health care. Keeping with this, a family medicine teaching site developed an educational initiative to expose trainees to interprofessional care processes and learning (Interprofessional Care Review; IPC). A formative evaluation pilot study was completed using one-on-one interviews and a focus group (n = 6) with family medicine residents. A semi-structured guide was utilized regarding: knowledge, skills and attitudes related to interprofessional care; their experience of the processes utilized in IPC. Data were analyzed using content analysis. Residents' perspectives on their learning revolved around four themes: changes to understanding and practice of interprofessional care; personal impact of IPC; learning about other health professionals; tension and challenges of IPC learning and clinical implementation. Residents valued the educational experience, but identified that faculty supervisors provided "mixed messages" in the value of collaborating with other health professionals. Implications regarding future educational and research opportunities are discussed.
- Carpenter, J., Barnes, D., Dickinson, C., & Wooff, D. (2006). Outcomes of interprofessional education for community mental health services in England: The longitudinal evaluation of a postgraduate programme. It concludes that a well-designed IPE program can help students in obtaining knowledge and skills and implementing these in their workplace. *Journal of Interprofessional Care, 20*(2), 145-145-161.  
This article provides an evaluation of a two-year longitudinal post-graduate program designed to enable health and social care providers to work together to deliver community mental health services.
- Hall, P., & Weaver, L. (2001). Interdisciplinary education and teamwork: A long and winding road. *Medical Education, 35*(9), 867-875.  
PURPOSE: This article examines literature on interdisciplinary education and teamwork in health care, to discover the major issues and best practices. MAIN FINDINGS: Two issues are emerging in health care as clinicians face the complexities of current patient care: the need for specialized health professionals, and the need for these professionals to collaborate. Interdisciplinary health care teams with members from many professions answer the call by working together, collaborating and communicating closely to optimize patient care. Education on how to function within a team is essential if the endeavour is to succeed. Two main categories of issues emerged: those related to the medical education system and those related to the content of the education. CONCLUSIONS: Much of the literature pertained to programme evaluations of academic activities, and did not compare interdisciplinary education with traditional methods. Many questions about when to educate, who to educate and how to educate remain unanswered and open to future research.
- Mattick, K., & Bligh, J. (2005). An e-resource to coordinate research activity with the readiness for interprofessional learning scale (RIPLS). *Journal of Interprofessional Care, 19*(6), 604-604-613.  
This study aimed to create a virtual community of researchers with a shared interest in quantitative studies of interprofessional learning using the Readiness for Interprofessional Learning Scale. An e-resource was created to provide access to relevant sources, coordinate research efforts, and promote communication. This paper discusses experiences and observations from the study.
- McNair, R., Stone, N., Sims, J., & Curtis, C. (2005). Australian evidence for interprofessional education contributing to effective teamwork preparation and interest in rural practice. *Journal of Interprofessional Care, 19*(6), 579-579-594.  
A pilot interprofessional education (IPE) placement for undergraduate health care professional students was implemented in Australia from 2001 to 2003. This article outlines the educational model used and focuses on the evaluation methods and results obtained from the student

evaluations. The placement experience improved self-reported teamwork skills and knowledge, and supported participating students' belief in the value of interprofessional practice.

Reeves, S., Zwarenstein, M., Goldman, J., Barr, H., Freeth, D., Hammick, M., et al. (2008). Interprofessional education: Effects on professional practice and health care outcomes. *Cochrane Database of Systematic Reviews (Online)*, (1)(1), CD002213.  
doi:10.1002/14651858.CD002213.pub2  
Literature review to assess the effectiveness of IPE interventions and educational programs in which the same health and social care professionals learn separately; and to compare the effectiveness of IPE interventions compared to no educational intervention.

Remington, T. L., Foulk, M. A., & Williams, B. C. (2006). Evaluation of evidence for interprofessional education. *American Journal of Pharmaceutical Education*, 70(3), 66-66.  
This article summarizes literature relevant to implementing interprofessional training programs in a way that will be most useful for clinician educators. Thirteen studies were identified. Interventions varied widely in intensity and design.

Rodehorst, T. K., Wilhelm, S. L., & Jensen, L. (2005). Use of interdisciplinary simulation to understand perceptions of team members' roles. *Journal of Professional Nursing : Official Journal of the American Association of Colleges of Nursing*, 21(3), 159-166.  
The aim of this study was to examine the effectiveness of an interdisciplinary approach to learning in helping care providers understand their overlapping roles in the clinical management of asthma. In addition, the perceived usefulness of an interdisciplinary approach for students in the health-care disciplines of nursing, medicine, pharmacy, and respiratory therapy to learn about the clinical management of asthma was explored. The diffusion of innovation framework was used to guide the process of development of CD-ROMs. An interpretative approach was selected for this research because of the emphasis on how a phenomenon is perceived and how meaning is constructed in situations. This approach assumes that multiple ways of interpreting experiences are available through interaction. A convenience sample of health-care practitioners from two rural campuses was selected to participate in this study. The cohort of participants represented students from the population of a large midwestern moderate-sized university that has four geographically distinct campuses. Preliminary results indicate that the use of interdisciplinary learning helps clarify the roles of each discipline and that learning from one another is enhanced.

Stone, N. (2006). The rural interprofessional education project (RIPE). *Journal of Interprofessional Care*, 20(1), 79-79-81.  
This article reports on the evaluation of the Rural Interprofessional Education Project, an optional two week undergraduate rural placement program for health discipline students in Victoria, Australia. The study found that students had an increased understanding of their roles, and felt "understood", 'confident', 'effective', and 'respected' while working with other health professionals and felt that IPE should be a part of every health professional student's training.

Thompson, T. L., Emrich, K., & Moore, G. (2003). The effect of curriculum on the attitudes of nursing students toward disability. *Rehabilitation Nursing : The Official Journal of the Association of Rehabilitation Nurses*, 28(1), 27-30.  
Societal attitudes toward people with differing abilities are often based on a lack of understanding, fear of the unknown, and stereotypes learned from others. Nursing students enter their educational programs with similar attitudes and experiences. Attitudes of nurses are key to how they respond toward individuals with disabilities and chronic illnesses. The nurses' attitudes affect the individual client's understanding of the disability and his or her self-concept as he or she adjusts to major life changes. The purpose of this descriptive study was to identify whether a change in curriculum and experience had an effect on nursing student attitudes. Using the Attitudes Toward Disabled Persons (ATDP) Scale, a pre-post study of 42 nursing students' attitudes toward individuals with disabilities was conducted. Tests were administered as the students entered their senior year and took the chronic illness course, and again at the completion of the senior year. The students' attitudes were

significantly more positive at the completion of their senior year. The findings suggest that education about, and experience with, individuals with disabilities positively affect the attitudes of nursing students toward individuals with disabilities.

- Woloschuk, W., Harasym, P. H., & Temple, W. (2004). Attitude change during medical school: A cohort study. *Medical Education, 38*(5), 522-534. doi:10.1046/j.1365-2929.2004.01820.x  
BACKGROUND: Attitudes influence behaviour. Developing and maintaining proper attitudes by medical students can impact on the quality of health care delivered to their patients as they assume the role of doctors. There is a paucity of longitudinal research reports on the extent to which students' attitude scores shift as they progress through medical school. OBJECTIVE: This study examined the change in attitude scores of a large student cohort as they progressed through medical school. Whether student gender is related to attitude change was also investigated. CONCLUSIONS: As students progress through medical school their attitude scores decline. The reasons for the shift in attitude scores are not clear but they may relate to a ceiling of high attitude scores at entry, loss of idealism and the impact of the unintended curriculum. Further study of the impact of medical education on student attitudes is warranted.
- Zwarenstein, M., & Reeves, S. (2006). Knowledge translation and interprofessional collaboration: Where the rubber of evidence-based care hits the road of teamwork. *Journal of Continuing Education in the Health Professions, 26*(1), 46-46-54.  
A Health Canada-funded randomized trial is described in which quantitative and qualitative data will be gathered as a means to examine the impact of interprofessional education and collaboration interventions on interprofessional relationships, health care processes, and patient outcomes. Routes are suggested by which interprofessional education and collaboration interventions might affect knowledge translation and evidence-based practice.