

ORIGINAL ARTICLE

Design and implementation of an interprofessional education course for undergraduate students at the University of Applied Sciences Western Switzerland: the Geneva experience

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Abstract

The School of Health of Geneva (SHG, part of the University of Applied Sciences Western Switzerland) introduced interprofessional education (IPE) in its Bachelor Programs in 2012. IPE is an approach that encourages collaboration between health care professionals, optimizing health care quality and decision-making processes. The aim of this article is to describe the implementation and evaluation of IPE at our Institution. IPE is a didactic program, comprising discussion about fictional clinical cases, simulated practice and project management, dispensed by an interdisciplinary academic team. Training is focused on communication and collaboration between students of the five health departments of our Institution and students from the Faculty of Medicine and Pharmacy of the Geneva University. The IPE program concerns on average 1000 future caregivers per year. Skill development resulting from IPE will be evaluated by an IPE research team via a student cross-sectional study, using the Readiness for Interprofessional Learning Scale (RIPLS). The results will be used for validating the French version of the RIPLS.

Keywords

Interprofessional collaboration,
interprofessional education,
interprofessional evaluation

History

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Introduction

The importance of interprofessional care education (IPE) has long been recognized as an essential approach in preparing a collaborative practice healthcare workforce (D'Amour, Ferrada-Videla, San Martin Rodriguez, & Beaulieu, 2005).

In Switzerland, the implementation of the Bachelor program in several health educations (nursing, physiotherapy, nutrition, midwifery, and medical radiology techniques) and the development of a post-graduate academic program in nursing (Master and PhD) provides favorable conditions for the development of IPE education partnership, principally with the medical schools. Meanwhile, the curriculum of the faculty of medicine and other health professions education is based on a common reference, advocating the development of transferable skills such as collaborating and communicating, both in Switzerland and abroad (Michaud et al., 2011). The aim of this article is to describe the IPE curriculum implanted at the SHG and the evaluation of this curriculum.

IPE curriculum description

At the School of Health of Geneva (SHG), an IPE curriculum was implanted in 2012 for the entire training program of all five health professions with the purpose of promoting IPE and collaboration between future health care professionals. In Switzerland, a new law about IPE professional proficiency

will be registered soon for health and medical professions (OFSP, 2013).

At the SHG, IPE is offered as a yearly 15 d didactic program. Simulated practice workshops, health promotion, and prevention projects are shared between students of the five departments and the medical faculty. Training is focused on communication and collaboration between future caregivers. Students confront their responsibility, role, and professional identity. While focusing on the patient's safety, students learn to understand each other's skills and limits within an interdisciplinary healthcare team. Training is dispensed by an interdisciplinary academic team to approximately 1000 students per year (250 doctors, 350 nurses, and 100 medical radiology technicians, dietitians, midwives, and physiotherapists). Ten ECTS of the 180 Swiss Bachelor of health credits are validated with IPE. In the first year, students join an IPE team (10 students) and focus on fictional clinical cases through courses, teamwork, and e-learning. The second year, part of the training is based on the methodology and instrumentation of health projects management. Students implement and evaluate their project in the context of the socio-sanitary health network of Western Switzerland. Meanwhile, they are trained in IPE practices at the Interprofessional Simulation Center (ISC), inaugurated in November 2013. The third year, education continues at school and in the ISC around complex situations, comprising emergency situations and multicultural contexts. Scenario-based training is shared between students of two or three health departments and medicine faculty students. The whole didactic program will be evaluated by a Quality assessment of IPE focuses on the acquisition of learning objectives, contents, teaching proficiency, and methodological skills.

Research plans

An IPE research team will study the general appraisal of IPE and, in particular, the improvement of skill in student cohorts using the Readiness for Interprofessional Learning Scale or RIPLS (Parsell & Bligh, 1999). A first step of this investigation will consist of the validation of the French version questionnaire. To our knowledge, the RIPLS has not yet been translated into French and has not been adapted for a French speaking population. Increasing international collaboration and rising numbers of multi-national and multi-cultural research reinforce the need to adapt questionnaires into languages other than the source language (Tamura et al., 2012; Tyastuti, Onishi, Ekayanti, & Kitamura, 2014). Questionnaire will be sent to students: nursing, physiotherapy, nutritioning, midwifery, medical radiology techniques, via their school e-mail. Psychometric validation of our French version of RIPLS will be done via the usual method (Tamura et al., 2012; Tyastuti et al., 2014).

The second step of this study will be to investigate the readiness for and perception of inter-professional learning for the first and second year nursing, physiotherapy, nutritioning, midwifery, medical radiology techniques students. Data collection follows the same procedure as RIPLS validation.

Demographic data of the participants were also collected. This study was approved by the Geneva University Hospital Ethics Committee.

Discussion

Actually, only a few IPE research has been done in the Francophone world and in Switzerland. This validation of the French version of RIPLS will be an essential tool for further

research. This validated tool will be comparison of future French results with existing international literature. This study will be the first evaluation of education program IPE effectiveness in Switzerland. This research is the first step of a larger research plan. Future objectives will be to measure effects of IPE education course for patient safety in real situation of care.

Declaration of interest

The authors report that they have no conflicts of interest. The authors alone are responsible for the content and writing of the paper.

References

- D'Amour, D., Ferrada-Videla, M., San Martin Rodriguez, L., & Beaulieu, M.D. (2005). The conceptual basis for interprofessional collaboration: Core concepts and theoretical frameworks. *Journal of Interprofessional Care, 19*, 116–131.
- Michaud, P.A., Luthi, F.T., Clerc, M., Gachoud, D., Chapuis, J., Allin, A.C., & Morin, D. (2011). Interprofessional education for all. An awareness experience for undergraduate students in Vaud. *Revue Medicale de la Suisse, 7*, 2363–2365.
- Office Fédérale de la Santé Publique OFSP. (2013). Rapport du groupe thématique Interprofessionnalité.
- Parsell, G., & Bligh, J. (1999). The development of a questionnaire to assess the readiness of health care students for interprofessional learning (RIPLS). *Medical Education, 33*, 95–100.
- Tamura, Y., Seki, K., Usami, M., Taku, S., Bontje, P., Ando, H., & Ishikawa, Y. (2012). Cultural adaptation and validating a Japanese version of the readiness for interprofessional learning scale (RIPLS). *Journal of Interprofessional Care, 26*, 56–63.
- Tyastuti, D., Onishi, H., Ekayanti, F., & Kitamura, K. (2014). Psychometric item analysis and validation of the Indonesian version of the Readiness for Interprofessional Learning Scale (RIPLS). *Journal of Interprofessional Care, 28*, 426–432.