



Effectiveness of Interprofesional Education Implementation in Health Services: Literature Review

1st Totok Wahyudi

Department of Nursing Science Program (of Affiliation)
Duta Bangsa University (of Affiliation) line 4
Surakarta, Indonesia
totok_wahyudi@udb.ac.id

2nd Endrat Kartiko Utomo

Department of Nursing Science Program
(of Affiliation):Duta Bangsa University (of Affiliation)
Surakarta, Indonesia
Endrat_kartiko@udb.ac.id

3rd Susi Lastianingsih

Department of Nursing Science Program (of Affiliation)
Duta Bangsa University (of Affiliation)
Surakarta, Indonesia
Susilastianingsih@gmail.com

4th Panji Azali

Department of Nursing Science Program (of Affiliation)
Kusuma Husada University (of Affiliation)
Surakarta, Indonesia
Azalipanji@gmail.com

5th Oktavia Nurcahyani

Department of Nursing Science Program (of Affiliation)
Duta Bangsa University (of Affiliation) Surakarta, Indonesia
Oktavianurcahyani28@gmail.com

ABSTRACT

The demands of people's need for health services in the global era will continue to change because the health problems faced by the community are also constantly changing. Changes in health or nursing services are integral to the development and change of nursing in Indonesia. In fact, it becomes a strange or unnecessary thing if the general public and the environment are constantly changing, while nursing which is part of the community does not change in managing the life of the nursing profession. The World Health Organization (WHO) officially recognized the importance of inter-professional learning in its report Learning Together for Collaborative Work for Health. Contributions from various disciplines have had a positive impact in solving various health problems and improving the quality of health services. Interprofessional education (IPE) is one of the education systems initiated by WHO as an integrated education system to prepare collaborative practices. IPE occurs when two or more professions learn and are able to collaborate in improving health. Purpose: Understanding "Interprofessional Education (IPE): effects in professional practice and its results for health" Method: This research was a literature review that using several articles taken from the database of electronic publications such as SAGE, Science Direct,

EBSCO, grey literatur. Result: The results of this study showed that 9 articles meet the criteria of inclusion From the review of the article obtained the subject that IPE can be used as a curriculum in universities and health faculties, and conducted the evaluation process of IPE, knowing the factors that affect IPE, the advantages and disadvantages of the implementation of IPE, the views of health workers on IPE, how the teaching method in explaining IPE, providing experience to students in terms of field practice , student perspectives related to the experience of implementing IPE and IPC, promoting a system of collaboration with other medical personnel in terms of technological advances. Conclusion: Inter-professional Education and Collaboration needs to be implemented in the learning curriculum at a university in order to prepare competent health workers and able to collaborate with other teams. It is necessary to evaluate the implementation of IPE in order to later be able to provide further input related to collaboration or IPE in a work unit or academics. So that later the IPE program can run in line with the development of health workers who continue to improve service to patients and collaboration in teams.

Keywords: *Interprofesional Education, Nursing, health service*



I. INTRODUCTION

The demands of the community's needs for health services in the global era will continue to change because the health problems faced by society also continue to change. Changes in health or nursing services are integral to the development and change of nursing in Indonesia. In fact, it becomes a strange or unnecessary thing if the general public and the environment are constantly changing, while nursing which is part of the community does not change in managing the life of the nursing profession.

In a study conducted by (Marpaung, 2011), it was explained that a quality health service system continues to experience changes, both in terms of technological advances and the health service procedures used (Siegler & Whitney, 2000). The health care system is still fragmented and the lack of communication often leads to wrong perceptions between professions (Ternov & Akelsson, 2005). This raises the vulnerability of medical errors (medical errors). The number of cases of death due to medical errors is very high when compared to other causes. The Institute of Medicine (IOM) reports that every year about 40,000-100,000 clients die from medical errors in healthcare services in the US. In Australia, medical errors result in 18,000 deaths and more than 50,000 patients become disabled each year (IHI, 2004).

The World Health Organization (WHO) officially recognized the importance of inter-professional learning in its report *Learning Together for Collaborative Work for Health* (World Health Organization, 1988). This report calls for closer links between the education and health systems to help ensure that health workers have the capacity to respond to health system needs. Although this report focuses on primary health care, the principles discussed are applicable across the health care continuum (Nisbet, Lee, Kumar, Thistlethwaite, & Dunston, 2011)

Collaborative practice occurs when several health workers with different professional backgrounds work in a team environment to provide health services. Contributions from various disciplines have had a positive impact in solving various health problems and improving the quality of health services (WHO, 2010). Collaborative practice can reduce waiting time (50%), worker absences (25%), intensive care unit costs (25%), and hospitalization of heart failure patients (50%) (IHI, 2004). The IOM states that healthcare professionals should be educated for patient-centered collaborative practice (NHS, 2005).

Interprofessional education (IPE) is one of the education systems initiated by WHO as an integrated education system to prepare collaborative practices. IPE occurs when two or more professions learn and are able to collaborate in improving health (CAIPE, 2011). Effective implementation of IPE can result in effective collaborative practices as well (WHO, 2010). IPE is an important step in preparing for better health worker collaboration practice readiness (Marpaung, 2011).

Quoted in the study (Marpaung, 2011), the development of IPE really requires the attitude and desire of students to work together (Barnsteiner, 2007). The students' enthusiasm and willingness to something new can be used as a benchmark for readiness. Readiness is a psychological attitude that a person must have before doing something (Slameto, 2003). According to Ker et al (2003), student acceptance of an understanding of other professions is an approach that must be met in implementing IPE. In order for interprofessional collaboration to run well at the professional education stage, IPE learning is needed in the academic period.

From the description of the above explanations and theories, researchers are interested in understanding "Interprofessional Education (IPE): effects in professional practice and outcomes for health". Researchers will



conduct literature reviews from several journals to see how much interprofessional education is related to the implementation of a health work unit in which there are several different health professions.

II. METHOD

Before searching for journals, researchers first determine the research topic. In this case the researcher has a research topic “Interprofessional Education (IPE): effects in professional practice and outcomes for health”. After obtaining the topic, the researcher determined a research question related to the topic “Does the application of Interprofessional Education and Interprofessional Collaboration affect the perspective of nurses in the work unit?”. From the research topic questions, the researcher conducted a literary search in accordance with PICO:

- P: Nurse Student, Medical Student, Nursing
- I: Application of Interprofessional Education in Nursing
- C: -
- O: Effects of Interprofessional Education in the Health Work Unit

The journal literature search was carried out by searching for publications in the health and medical literature as well as Gray Literature, in order to fulfill the literature review material in this paper.

After searching for journals in the database: Science Direct with the keyword Interprofessional And Clinical Practice and the maximum journal year for the last 10 years, 28 journals were obtained and 9 journals were selected. In the Sage data base with the keyword “Effective Interprofessional And Clinical Practice, search results were obtained for 1,205 journals and the research year was selected to be the last 10 years, 2 journals were selected, and 2 articles from Gray Literature.

The next screening process is to read abstracts and exclude duplicate journals.

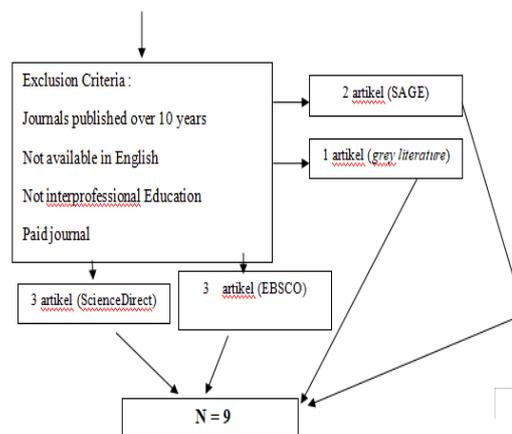


Figure. 1 Article search process

III. DISCUSS AND RESULT

Quality health services will experience a change over time which is marked by an advancement of the times, both in technological advances and in health care procedures provided to patients. This must be in line with preparing health workers, especially in this case the nursing profession is able to collaborate with other health workers. So that later the services provided can be useful for patients. Preparations are made starting from a formal academic environment that makes Interprofessional Education and Interprofessional Collaboration become learning curriculum in the education system. This is in line with the research conducted by (VanKuiken et al., 2016) with the title “Integrating interprofessional education into the curriculum: Challenges and solutions for a university without a medical center.” This article explains that faculties from universities without a medical center focus on fulfillment. the development needs of students from various health-related disciplines with various levels of experience experienced, by assigning assignments about other disciplines for the long semester on the IPE program. IPE helps build



competencies in understanding professional roles, interprofessional communication, and interprofessional teamwork.

The advantages and disadvantages of implementing Interprofessional Education are explained in a study conducted by (Méndez et al., 2008) conducted in Spain, the results of the research are that the advantage of learning with IPE is to build a more positive attitude how to communicate well in teamwork between other health teams and even the social community. However, how to implement the design of IPE has not been found, so it is advisable to orientate to patient needs. As a result, learning methods and time and initiative must be tailored to the needs of the patient or student. From the research above, we can conclude that there are many advantages that can be obtained by the University if it runs the Interprofessional Education Curriculum.

There are many factors that can influence Interprofessional Education, including the use of 4-dimensional curriculum development (identification of future health care practice needs, definition and understanding of abilities, teaching and assessment, institutional support). Which later can be a factor that can build an Interprofessional Education curriculum in an academics that can support the running of the curriculum, this research was conducted by (Thistlethwaite, 2015) at the University Of Technology Sydney (UTS) in Australia.

Each health worker will have their own views about the importance of Interprofessional Education and Collaboration and what is the impact on the health work unit itself. Such research conducted by (Derbyshire & Machin, 2011) in the United Kingdom by conducting in-depth interviews was analyzed and five key themes emerged: general understanding of IPE; teaching and learning; understanding of professional roles; stereotypes; the influence of the practice environment. The results suggested that IPE should be practice focused to increase

its relevance to nursing practice. This research contributes to the development of an innovative curriculum that provides nurses with the opportunity to integrate IPE theory into their collaborative work practice.

In a work unit, it can be evaluated whether Interprofessional Education can run well. Use of an evaluation framework to define outcomes and a quality improvement model for structures to design and test interventions that could provide a scientific basis for measuring the effectiveness of IPE-based simulations. Multisite's collaborative efforts could increase the homogeneity of design and evaluation, thereby increasing the generalizability of findings. Ultimately these practices may lead to evidence-based recommendations for attempts to use IPE simulations (Zhang et al., 2011) in the USA (United State America).

In implementing interprofessional education, it cannot be separated from the teacher, the teacher as a reference in the implementation of interprofessional education and collaboration. The teaching staff has a method in delivering material about IPE to other health workers. Such as research conducted by (Chen et al., 2016) to identify the current methods preceptors use to teach participants from other professions in clinical settings, especially sophisticated nursing practice (APN) and medical trainees, and to identify factors that support or hinder kind of precepting. The results of this study suggest that IPE in a clinical practice setting is necessary in order to prepare health professional participants for interprofessional collaborative practice in the workplace. While participants can learn concepts around interprofessional collaboration in the classroom or in simulations, having a place to apply skills with the guidance and role modeling of clinical teachers is essential for skills and role development.

After getting an explanation of interprofessional education, it is hoped that students



can carry out this in the world of practice later, so that they start getting used to teamwork with other health workers. Students are given field practice to see events directly in a work unit, so that they can play a direct role in that environment. Such as research conducted by (Suiter et al., 2015) students from four different professions (medicine, nursing, social work, and pharmacy). This qualitative research allows us to explore the experiences of students, staff, and patients as they interact in a community-based clinical setting during the school year. We found that interprofessional, clinic-based experiences provide opportunities for students to develop practice-based knowledge and skills, as well

to learn about how complex issues such as poverty, culture, and whole personal care affect public health practice.

As research conducted by (Prentice et al., 2015) examined interprofessional collaboration experiences from the perspective of nursing and medical students. Where the participants taken were 17 medical students and nursing students from two different universities participating in the study. The findings indicate that interprofessional collaborative experiences in learning events are influenced by natural groupings of common interests among students. Doctor-nurse relationships before educational programs and during clinical placements dominate the formation of new relationships and the acquisition of new knowledge about roles, which may have implications for future practice.

After later, inter-professional education and collaboration can run well, over time there will be changes in implementing these methods. Because technological advances and better patient knowledge can provide input to health workers to improve the service system, not only that in the world of communication, health workers are required to keep updating it. As research conducted by (Gray & Rutledge, 2014) this study describes an experiential activity

used in doctors, this nursing practice program to promote interdisciplinary technology collaboration. Through improved collaborative experience technology participants received encouragement and guidance, we found that anxiety was eased, and NPs were ready to use communication technology for collaboration in their own nursing practice. As technologies are introduced, more NPs may find it advantageous to explore how telehealth can enable them to collaborate with other disciplines in nursing as well as other professions to improve the care they provide to their patients.

From the description above regarding several literature reviews on interprofessional education and collaboration, it is very clear that this method must be implemented by universities to prepare health workers who are able to collaborate with other health workers. In order to create a good work environment and be able to provide maximum service to patients. So that the needs needed by patients can be met humanistically (Bio, Psycho, Social and Spiritual).

IV. COCLUSION

Interprofessional education (IPE) is one of the education systems initiated by WHO as an integrated education system to prepare collaborative practices. IPE occurs when two or more professions learn and are able to collaborate in improving health (CAIPE, 2011). Effective implementation of IPE can result in effective collaborative practices as well (WHO, 2010). IPE is an important step in preparing better preparedness for collaborative health workforce practices.

The development of IPE really requires the attitude and desire of students to work together (Barnsteiner, 2007). The students' enthusiasm and willingness to something new can be used as a benchmark for readiness. Readiness is a psychological attitude that a person must

have before doing something (Slameto, 2003). According to Ker et al (2003), student acceptance of an understanding of other professions is an approach that must be met in implementing IPE. In order for interprofessional collaboration to run well at the professional education stage, IPE learning is needed in the academic period.

From several journals taken from the data base: Science Direct & Sage and Gray Literature, it can be concluded that Interprofessional Education and Collaboration need to be applied in the learning curriculum at a university in order to prepare competent health workers who are able to collaborate with other teams. As described in Table 1 (List of Journals) which describes several health journals on Interprofessional Education and Collaboration.

It is necessary to evaluate the implementation of IPE so that later it can provide further input regarding collaboration or IPE in a work unit or academics. So that later the IPE program can run in line with the development of health workers who continue to improve service to patients and collaboration in teams.

V. DAFTAR PUSTAKA

1. Chen, A. K., Rivera, J., Rotter, N., Green, E., & Kools, S. (2016). Interprofessional education in the clinical setting: A qualitative look at the preceptor's perspective in training advanced practice nursing students. *Nurse Education in Practice*, 21, 29–36. <https://doi.org/10.1016/j.nepr.2016.09.006>
2. Derbyshire, J. A., & Machin, A. I. (2011). Learning to work collaboratively: Nurses' views of their pre-registration interprofessional education and its impact on practice. *Nurse Education in Practice*, 11(4), 239–244. <https://doi.org/10.1016/j.nepr.2010.11.010>
3. Gray, D. C., & Rutledge, C. M. (2014). Using new communication technologies: An educational strategy fostering collaboration and telehealth skills in nurse practitioners. *Journal for Nurse Practitioners*, 10(10), 840–844. <https://doi.org/10.1016/j.nurpra.2014.06.018>
4. Marpaung, N. D. (2011). Universitas Sumatera utara. *Tesis*, (X), 1–6. <https://doi.org/10.1007/s13398-014-0173-7.2>
5. Méndez, M. J. P., Armayor, N. C., Navarraz, M. T. D., & Wakefield, A. (2008). The potential advantages and disadvantages of introducing interprofessional education into the healthcare curricula in Spain. *Nurse Education Today*, 28(3), 327–336. <https://doi.org/10.1016/j.nedt.2007.06.007>
6. NHS. (2005). Medical error, (2008), 1–9.
7. Nisbet, G., Lee, A., Kumar, K., Thistlethwaite, J., & Dunston, R. (2011). Interprofessional Health Education A Literature Review, (May), 1–43. Retrieved from <http://www.health.wa.gov.au/wactn/docs/IPEAUSlitreview2011.pdf>
8. Prentice, D., Engel, J., Taplay, K., & Stobbe, K. (2015). Interprofessional Collaboration: The Experience of Nursing and Medical Students' Interprofessional Education. *Global Qualitative Nursing Research*, 2, 1–9. <https://doi.org/10.1177/2333393614560566>
9. Suiter, S. V., Davidson, H. A., McCaw, M., & Fenelon, K.-F. (2015). Interprofessional Education in Community Health Contexts. *Pedagogy in Health Promotion*, 1(1), 37–46. <https://doi.org/10.1177/2373379914561470>
10. Thistlethwaite, J.E. (2015). Interprofessional education: implications and development for medical education. *Educación Médica*, 16(1), 68–73. <https://doi.org/10.1016/j.edumed.2015.04.007>



11. VanKuiken, D. M., Schaefer, J. K., Flaum Hall, M., & Browne, F. R. (2016). Integrating interprofessional education into the curriculum: Challenges and solutions for a university without a medical center. *Journal of Interprofessional Education & Practice*, 2, 5–11. <https://doi.org/10.1016/j.xjep.2015.12.002>
12. Zhang, C., Thompson, S., & Miller, C. (2011). A Review of Simulation-Based Interprofessional Education. *Clinical Simulation in Nursing*, 7(4), e117–e126. <https://doi.org/10.1016/j.ecns.2010.02.008>