



<http://fhs.mcmaster.ca/facdev/pbsg-ed.html>

# Working Together

## *Interprofessional Education and Collaboration Among Health Professionals*

### Introduction to PBSG-ED Series

This special series of modules is dedicated to enhancing the educational skills of busy clinical teachers. The modules provide continuing education in a case-based format that makes judicious use of the most recent and best education evidence available. Starting from real-life examples of teaching and learning situations, the modules have been designed to promote discussion with colleagues around challenging issues/dilemmas that are likely to arise when working with learners. Their purpose is to foster reflection and provide opportunities to refine skills – preparing the way for selected changes that can improve teaching and learning.

Collaboration can benefit all players in the health care system, enhancing care and safety for patients and improving workload and job satisfaction for health professionals. It can also help learners to develop positive interprofessional behaviours and team work expertise. Teaching and modelling a collaborative approach to learners will convey and reinforce the attitudes, knowledge and skills they need to become collaborative practitioners in the future.

#### **Practice Challenges:**

- Limited opportunities for clinical teachers to assess/reflect on their own interprofessional collaboration.
- Learners are unclear about the scope of practice/role of different professions.
- Structural barriers (e.g., scheduling, time) hamper interprofessional collaboration.

#### **This module aims to help clinical teachers:**

- Reflect on their own interprofessional collaborative behaviour and effectively role model this behaviour to learners.
- Facilitate learners' understanding regarding the scope of practice/ role of other professionals.
- Identify opportunities to teach collaborative care and to address structural barriers.

Developed in collaboration with:

The Foundation for Medical Practice Education  
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Case Example: Primary Care Team – Physician, resident, nurse practitioner (NP), dietitian

The professionals in this practice site are extremely busy with few opportunities for team meetings. Generally, the team is able to collaborate and make team decisions on an “as needed” basis. However, the NP meets with the physician, expressing concerns she has about a new resident. The resident made decisions about several patients without consulting the NP, who disagrees with many of the plans of action. As well, the NP had made prior arrangements for the registered dietitian to provide some education to a diabetic patient. The resident, however, told the patient that this wasn’t a priority. The patient appears confused by the mixed messages.

- What would be your thoughts about this situation?
- What could have been done to prevent this situation from occurring?

SAMPLE  
Not for Use