

Capitalizing on Interprofessional Education Opportunities: Structured Interprofessional Shadowing Pilot Project

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Interprofessional Shadowing (IPSh) occurs when a student from one discipline spends time observing and interacting with practitioners or students of another discipline.

Interprofessional education (IPE) is the process of preparing people for collaborative practice, and interprofessional collaboration itself, is increasingly incorporated into health professional education and models of practice.

Interprofessional collaboration (IPC) occurs when learners/practitioners, patients/clients/families and communities develop and maintain interprofessional working relationships that enable optimal outcomes.

Why Interprofessional Shadowing

Students have identified IPSh as a key activity to support knowledge and develop skills for IPC. The intentional development and application of IPC skills should occur in authentic environments, such as practicum placements.

Although IPE, where students and professionals **learn with, from, and about** one another, has been integrated into accreditation requirements for many health science programs, the intentional integration into contextually authentic settings is inconsistent.

Engaging Students

The Interprofessional Education Student Collaborative Group (IPESCG) is comprised of student representatives from each health professional program at the University of Alberta.

- The IPESCG provides student perspective including identifying barriers, advocating for solutions and engaging in interprofessional projects
- The IPESCG surveyed 244 University of Alberta Health Sciences students to better understand their IPE priorities
- Based on survey results, Health Sciences Education and Research Commons (HSERC) and IPESCG student group targeted IPSh for a collaborative experiential learning project (Figures 1 and 2)

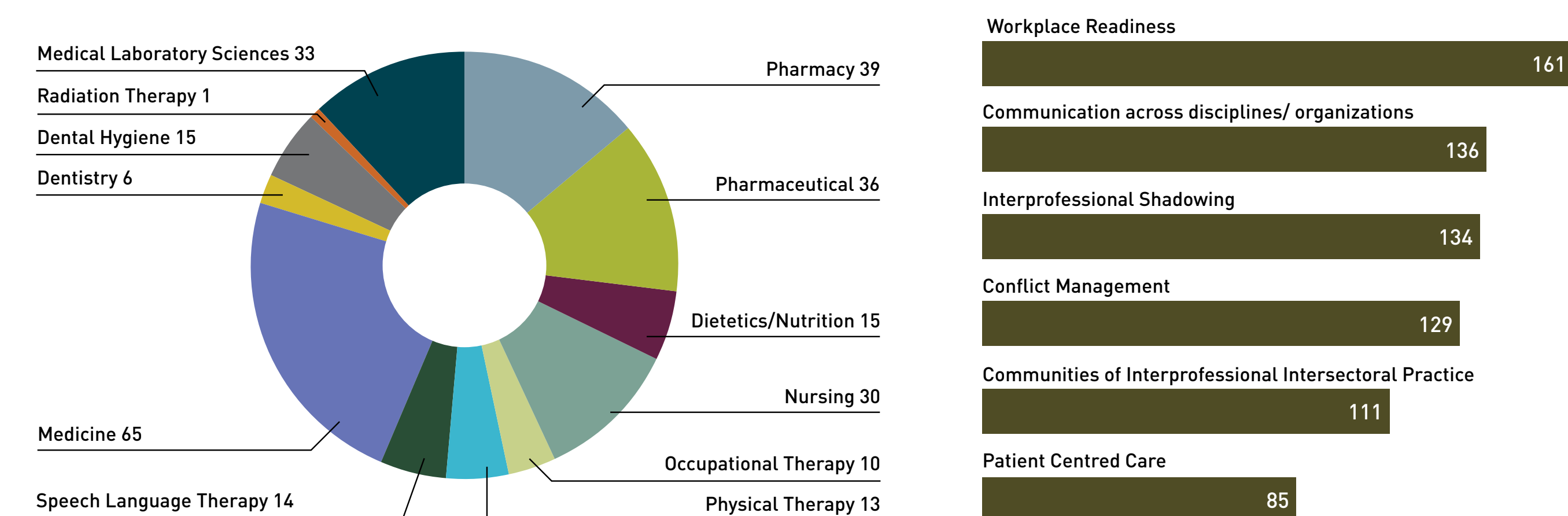


Fig1. IPESCG 2017/18 Survey participants

Fig2. Student interest in potential IPE opportunities

The IPESCG (2017) defined Interprofessional Shadowing as:

- Awareness of how professionals work together in context
- Appreciation for the roles and perspectives of different healthcare specialties to enhance future practice with a focus on the roles they play within a patient's healthcare journey

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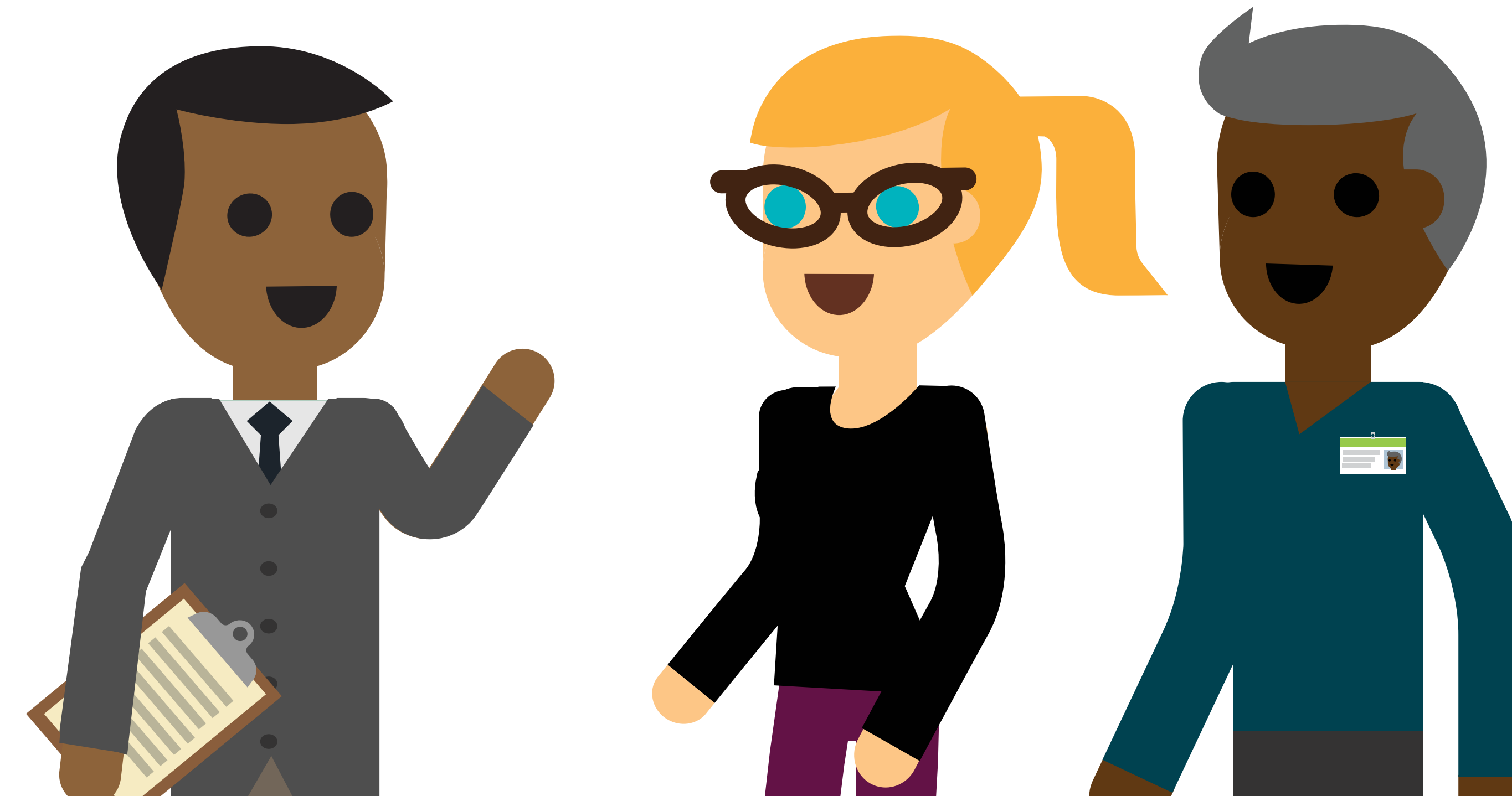


Fig3. Preceptor connects a student with a practitioner for an IPSh experience

Literature suggests Interprofessional Shadowing can support:

- Clarifying roles including reflection on pre-existing attitudes⁷
- Reflecting on positions of power and leadership among professions including the dynamic between patients and professionals⁷
- Observing and understanding the impact of interprofessional communication between professionals, patients, and patient families^{4,7}
- Identifying benefits, challenges, and broader issues of team work^{2,4,7}
- Enhancing future collaboration and success in reaching common professional goals focused on the patient^{2,4}

Things to consider:

Faculty:

- Supporting the IPSh experiential learning process (learning by doing)- "encourages reflection about the experience to develop new skills, new attitudes, or new ways of thinking."⁵

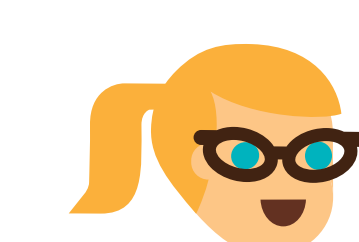
Preceptor:

- Balancing students' IPSh experience with their clinical requirements is crucial to their advancement

Students:

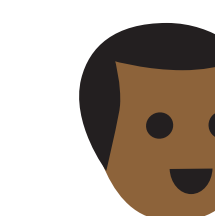
- Professionalism is key to build relationships
- Adhere to placement agreement as shadowing outside of courses and practicums may present risks for the student
- Respect practitioners time

Expected Outcomes



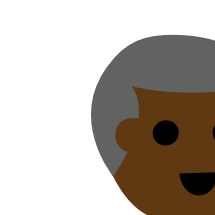
Student:

- Enhanced understanding of the roles and responsibilities of other professions
- Engage in interprofessional discussions and reflect on IPC including overlap of professional roles
- Better understand shared priorities of patient, client, family and community goals to support collaboration including gaining respect for other professions, improving interprofessional communication and teamwork



Preceptor:

- Develop and maintain relationships with interprofessional practitioners in the workplace
- Enhanced understanding of interprofessional education and link to collaborative practice
- Awareness of structured approaches to interprofessional shadowing



Practitioner:

- Engage in discussions and reflect on IPC
- Practice using a structured approach to interprofessional conversations
- Build shared priorities of patient, client, family and community goals to support collaboration

Conclusions

Intentional integration of IPE, including IPSh, in curriculum will support consistency and sustainability across programs. IPSh may have an impact on supporting open and collaborative culture in health care by building bridges between students and practitioners, as well as across professions within the healthcare context.

Students, preceptors and interprofessional practitioners may gain skills and confidence in developing, nurturing and maintaining effective collaborative networks including:

- Building social capital and relationships
- Negotiating priorities
- Perspective taking
- Conflict management

References:

1. Bainbridge, L., Regehr, G. (2015). Should there be an "I" in team? A new perspective on developing and maintaining collaborative networks in health professional care. In C. Orchard & L. Bainbridge (Eds.), *Interprofessional client-centred collaborative practice: What does it look like? How can it be achieved?* Nova Science Publishers: New York, NY. Chapter 4, pp 51-66. Retrieved from ResearchGate website: <https://www.researchgate.net/publication/291822066>
2. Fougner, M., & Horntvedt, T. (2011). Students' reflections on shadowing interprofessional teamwork: a Norwegian case study. *Journal of interprofessional care*, 25(1), 33-38. DOI: 10.3109/13561820.2010.490504
3. Kent, F., Hayes, J., Glass, S., & Rees, C. E. (2017). Pre-registration interprofessional clinical education in the workplace: a realist review. *Medical education*, 51(9), 903-917. DOI: 10.1111/medu.13346
4. Riva, J. J., Lam, J. M. S., Stanford, E. C., Moore, A. E., Endicott, A. R., & Krawchenko, I. E. (2010). *Chiropractic & osteopathy*, 18, 31. DOI: 10.1186/1746-1340-18-31
5. Schwartz, M. (2012). Best practices in experiential learning. Retrieved from Ryerson University Teaching and Learning Office. <https://www.ryerson.ca/lt/>
6. The University of Texas at Austin, College of Pharmacy. (2018). *Interprofessional shadowing with structured interprofessional active observation (SIAO): Guidelines for preceptor/clinician/practitioner*.
7. Wright, A., Hawkes, G., Baker, B., & Lindqvist, S. (2012). Reflections and unprompted observations by healthcare students of an interprofessional shadowing visit. *Journal of interprofessional care*, 26(4), 305-311. DOI: 10.3109/13561820.2012.678507.