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## Interprofessional Education

The CDNM is the peak organisation that represents the Deans, Leaders and Heads of Higher Education courses for Nursing and Midwifery throughout Australia and New Zealand. The Council is the voice of higher education for nurses and midwives, and provides leadership on health policy, education standards and research as applied to nurses and midwives.

### Background

The Council of Deans of Nursing and Midwifery (Australia and New Zealand) supports interprofessional education (IPE) in professional-entry nursing and midwifery programs as a means of improving collaboration, communication and respect among health professionals.

### Summary

- Effective collaborative interprofessional teamwork requires a transformation of how health professionals are educated
- Collaborative teamwork depends on educating healthcare professionals together
- Pre-placement interprofessional learning is essential to prepare students to work effectively and collaboratively in interprofessional teams and to understand various professional roles during placements

### Position

Interprofessional education (IPE) 'occurs when two or more professions learn with, from and about each other to improve collaboration and the quality of care' (WHO 2010). The fundamental premise of interprofessional education is that if health professional students learn together they will be better prepared for interprofessional collaboration which ultimately leads to improved patient outcomes.

IPE is recognised as a means of facilitating healthcare professionals to better understand and respect the roles and contribution each discipline plays in the delivery of health services across sectors. Traditional approaches to educating healthcare professionals have been based on profession-centric approaches which foster a sense of 'insiders and outsiders' and creates division, elitism and territorialism. IPE is designed to enable healthcare professionals to work together effectively to deliver safe and effective healthcare in complex environments.

Therefore, in order to develop effective and collaborative healthcare teams it is essential that students actively learn together, share ideas and bring their individual skills and expertise to the delivery of safe, quality healthcare. However, effective interprofessional education can be difficult to timetable and can have financial implications for education providers, in that clinical supervision may need to be provided by a range of healthcare professionals to support and assess student practice outcomes.

In an Australian study by Gilligan et al (2014) undergraduate students' of nursing, medicine and pharmacy were asked about their experiences of IPE. It was found that the IPE experiences they most valued involved 'genuine engagement and opportunities to interact', rather than simply exposure to a didactic lecture from another health professional.

The need to embed opportunities for IPE into professional-entry health professional education is mandated by a number of accreditation councils in Australia and New Zealand. In a recent workshop titled "*Collaborating for Patient Care - Interprofessional Learning for Interprofessional Practice*" (Australian Nursing and Midwifery Accreditation Council 2016), Australian and New Zealand stakeholders from a range of accreditation councils came together with 'the aim of improving delivery of coordinated interprofessional education between health professions in Australia'. Eight key outcomes were identified from this workshop as well as a series of action to facilitate more effective IPE across health professions.

The Council of Deans of Nursing and Midwifery support the proposed actions to achieve the stated outcomes while acknowledging that universities, national boards, accreditation authorities, health departments and the professions all have a role to play in the development of accredited curricula that can offer effective IPE.

In considering interprofessional education, CDNM takes the position that:

- IPE is valuable in encouraging effective collaboration, communication and respect across health professions
- Opportunities to engage in IPE must be embedded in professional-entry health curricula
- A range of organisational, structural, financial, regulatory and professional barriers exist and these need to be addressed before IPE can be widely adopted in nursing and midwifery education across Australia and New Zealand.

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