



THE UNIVERSITY OF BRITISH COLUMBIA
**PHARMACEUTICAL
SCIENCES**

Advancing Interprofessional Education at UBC

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a place of mind

Outline

- College of Health Disciplines
 - Institutional Commitment
 - Students
- Faculty of Pharmaceutical Sciences
 - Academic Commitment
 - Examples of Learning Activities

Resources

- Director, IPE Curriculum, College of Health Disciplines (0.4 FTE)
- IPE Curriculum Coordinator, Faculty of Pharmaceutical Sciences (0.4 FTE)

Institutional Commitment

College of Health Disciplines

- The first university-based centre in Canada (2001) to receive time, space and funds to move collaborative education, practice and research forward. This unique unit brings together UBC's 15 health and human service programs to work towards this purpose.
- **Mandate:** to advance interprofessional education and research and facilitate patient-centred practice through greater cooperation between the health professions at UBC
- **Structure:** Principal; Vice-Principal; 3 Directors in Division of Interprofessional Education and Practice (**Resources**)
 - Curriculum; Practice Education (PE); Professional Development (PD)

Institutional Commitment

College of Health Disciplines

- 14 senate approved **Interprofessional Health & Human Service (IHHS) Courses** (~22 instructors)
 - Annual IHHS Instructor's Forum
- IPE Curriculum Committee (IPECC) – monthly meetings
 - 2 student reps (HSSA, i-SAG)
 - Focus has moved from IHHS Curricula to advancing IPE at UBC
- Practice Education Committee – developing activities that preceptors can use to make IP learning more explicit
- PD Committee – developed IPCLS – 6 workshops that address the competencies required for IPC; adopted by all 6 Health Authorities in B.C.

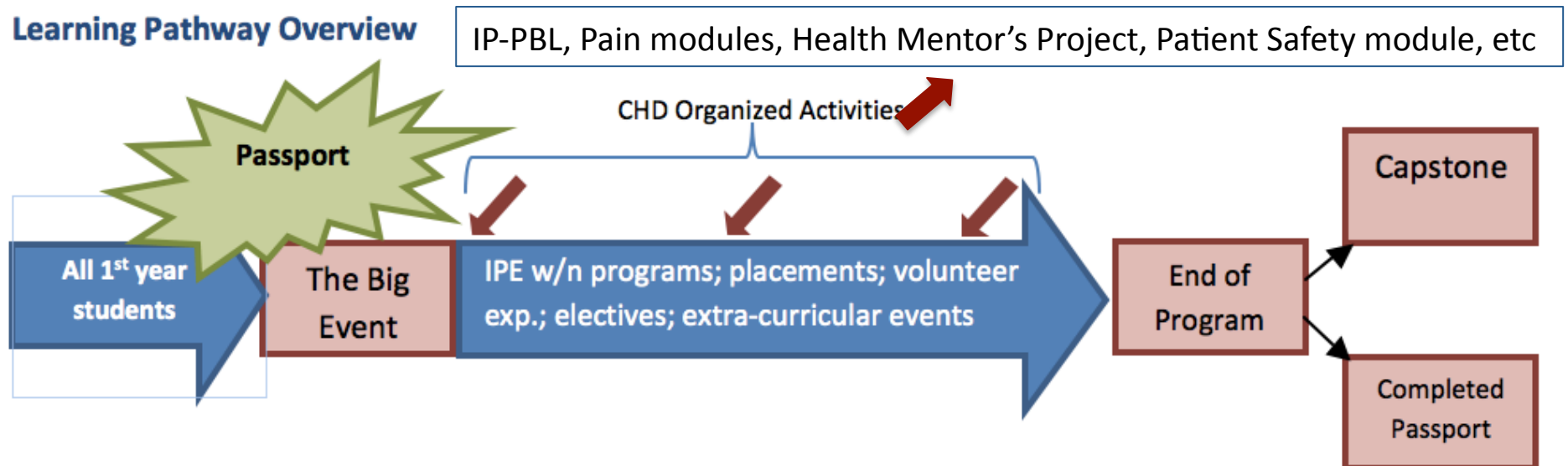
Institutional Commitment

College of Health Disciplines

Interprofessional Learning Pathway

- **Rationale:**
 - To increase the # of IP learning experiences available to HHS students
 - To ensure all students participate in IPE as a required component of their program
- Working most closely with the 6 AIPHE programs to build capacity for IPE (as capacity grows, will introduce this to other programs)

Learning Pathway Overview



Institutional Commitment

College of Health Disciplines

E-Passport

- Will include all IPE opportunities available to students and track their points
- Developing 'weighting' (# of points) criteria based on:
 - # of professions; level of interactivity; # of interactions; # of IPE competencies covered; explicit learning outcomes; assessment
 - how to decide how much is enough??
- Use as a 'learning' tool vs. an 'assessment' tool

Beginning Your Interprofessional Journey: The Big Event

- First year students from the 15 HHS programs (7 faculties) – Oct 6th (3 – 6pm)
- Competencies: Role Clarification, Team Functioning, Interprofessional Communication
- Event will be ‘anchored’ around the SDH
 - *How could your profession help to mitigate the risks to this patient? Why is working together (& with the patient) so much more effective than working alone? What gets missed if we work alone?*
- Goal is to make students see they are the future of the HC system and that they have the ability and power to change it through seeking out collaboration.

Student Commitment

- Interprofessional Student Advisory Group (i-SAG)
 - Meet directly prior to IPECC meetings
- HSSA
- CHIUS



Academic Program

Faculty of Pharmaceutical Sciences

- **Our Goal:** To develop and implement an interprofessional learning 'stream' that allows our students to gain the competencies required for collaborative patient-centred practice.
 - Students will use CHD's Learning Pathway Management System (including e-passport) to track and reflect upon their interprofessional journey

Creating a Curriculum Framework

- Key documents:
 - National Competency Framework for Interprofessional Collaboration (CIHC) Feb 2010
 - AFPC Education Outcomes for First Professional Degree Programs in Pharmacy (Entry-to-Practice Pharmacy Programs) June 2010
 - CCAP Draft Accreditation Standards and Guidelines for the First Professional Degree in Pharmacy Practice (2012)
 - UBC Faculty of Medicine – CANMED/National Competency Framework - Draft



A National Interprofessional Competency Framework

FEBRUARY 2010

- Role Clarification
- Patient/Family-Centred Care
- Team Functioning
- Collaborative Leadership
- Interprofessional Communication
- Interprofessional Conflict Resolution

COLLABORATOR ROLE

As **Collaborators**, pharmacy graduates

3.1. *Function as members of teams.*

- 3.1.1 accept leadership roles where appropriate;
- 3.1.2 actively make their expertise available to others and willingly agree to share relevant information, using language that can be understood by all;
- 3.1.3 clarify roles, responsibilities and expertise of team members, identifying overlaps and gaps;
- 3.1.4 recognize and respect the roles, responsibilities and competence of other professionals;
- 3.1.5 make their points of view known, listen to and respect the opinions of others, defend points of view if necessary;
- 3.1.6 contribute to planning, organizing and performing of work to be done, and integrating evidence while evaluating the results;
- 3.1.7 respect the rules established by the group;
- 3.1.8 help maintain a healthy work environment and assist with conflict management, and;
- 3.1.9 support continued efforts of the group by providing positive feedback, including evidence of progress and impact.

3.2 *Support team-based care in a community setting with geographically distinct centres of care.*

- 3.2.1 develop and maintain collaborative relationships with a network of local health care professionals and care providers;
- 3.2.2 clarify pharmacist's roles and responsibilities that are acceptable / appropriate;
- 3.2.3 fulfill commitments for provision and follow-up of care;
- 3.2.4 adapt their roles in teams and networks of care to the circumstances and requirements, and;
- 3.2.5 participate in local health initiatives as requested and appropriate.

3.3 *Work collaboratively with the patient and his/her health care professionals to provide care and services that facilitate management of the patient's health needs.*

- 3.3.1 negotiate the care and services that the pharmacist and other members of the health care team will provide as consistent with laws / regulations relevant to collaborative care;
- 3.3.2 ensure attainment and maintenance of training / certification / credentials required to provide collaborative care or to fulfill medical directives / delegation;
- 3.3.3 ensure legality of collaborative practice agreements / medical directives / delegation agreements;
- 3.3.4 the provision of care in a coordinated fashion;
- 3.3.5 provide agreed upon care and services;
- 3.3.6 document the provision of care and services, and;
- 3.3.7 communicate and review the care / services provided and patient status / outcome.

Mapping Exercise

2. Team Functioning:



- demonstrate the ability to function in a healthcare team by applying the principles of team development and process (3.1.7 respect the rules established by the group;)
- contribute points of view and demonstrate respect for all members' participation/points of view in collaborative decision-making (3.1.5 make their points of view known, listen to and respect the opinions of others, defend points of view if necessary;)
- establish and maintain effective and healthy working relationships with learners, practitioners, patients, and caregivers, whether or not a formalized team exists
- demonstrate respect for team ethics, including confidentiality, resource allocation, and professionalism
- work with others to assess, plan, provide and integrate evidence-based care for patients (3.1.6 contribute to planning, organizing and performing of work to be done, and integrating evidence while evaluating the results)
- participate effectively in interprofessional team meetings by facilitating discussions and interactions among team members and regularly reflecting on their functioning within the team
- support continued efforts of the group by providing positive feedback, including evidence of progress and impact (3.1.9 AFPC)
- perform their own roles in a culturally respectful way (medicine)
- describe the traditional power relationships and hierarchies that undermine the implementation of effective inter- and intra-professional education and practice and provide recommendations on how to address them. (medicine)
- develop and maintain collaborative relationships with a network of local health care professionals and care providers (3.2.1)

Team Functioning:

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Year	Educational Strategy (Course Embedded in)	National Interprofessional Competency						
		Mode of Delivery	Role Clarification	Team Functioning	Patient-Centred	IP Communication	Collaborative Leadership	IP Conflict
1	The Big Event - Beginning Your IP Journey (CHD) (follow up activities)	Face-to face (multi-discipline)	X	X	X	X		
1	Phar 201/299 Roles/Responsibilities	Tutorial Uniprofessional	X					
1-4	Professional Roles/Scope Module (TBA)	Online (uniprofessional)	X					
2	Health Mentors Program Elective (2 or 3 credit) - face to face	Face to face (multi-discipline)	X	X	X	X	X	X
2	Pharmacist-Physician Collaborator Module - pre-req. for Experiential Program(TBA)	Online (uniprofessional)	X	X	X	X	X	X
3	Pharmacist on Call (TBA)	Via telephone (med/nursing)	X	X	X	X		
4	IP Case with Med/Nursing (Phar 450 Elective)	Face-to-face (med/nursing)	X	X	X	X	X	X
3&4	Experiential Program	Shadowing/observation Face-to-face teamwork	X	X	X	X	X	X
1-3	IP Pain Module 1 (CHD to coordinate)	Online & Face-to-face	X	X	X	X	X	X
1-3	IP Pain Module 2 (CHD to coordinate)	Online & Face-to-face	X	X	X	X	X	X
2-4	IP-PBL Case (CHD to coordinate)	Face-to-Face	X	X	X	X	X	X

Pharmacist on Call – Year 3/4

- Senior level nursing (& potentially NPs) and medical students call the pharmacy student with a patient related drug information question
- Potential mechanisms:
 1. Call  Pharmacy student  PharmD student
 - PharmD student gets the opportunity to “mentor” the pharmacy student
 - **PRO: faculty is assured responses would be accurate** ✓
 2. Call students rotating through our Pharmacy Clinic

Pharmacist-Physician Collaboration

Module – (Yrs 2-4)

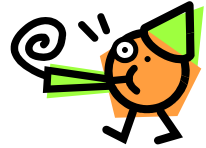
- A series of modules that teach pharmacy students the necessary knowledge, skills, attitudes and behaviours that are relevant to developing a successful collaborative relationship with the physician. (in a **community setting**)
 - what factors make collaboration successful?
 - what are the barriers to collaboration? (**relationship initiation; role clarification; trust; pharmacists??**)
 - What practical strategies can be taken in order to overcome these barriers?
- Will include examples in community where collaborative practice occurs between the pharmacist & physician (& video-clips from both professions)
- **Required before community rotation**

Lessons Learned

Barriers

- Pharmacy is not included in the “Faculty of Medicine”
- LOGISTICS!!

Steps to overcome them

- Be persistent A cartoon character with an orange face, green body, and black limbs. It is holding a green rectangular object with a black spiral target on it. The character has a determined expression with a small sweat drop above its head.
- Be creative and flexible (online; workshops; starting with 2 professions)

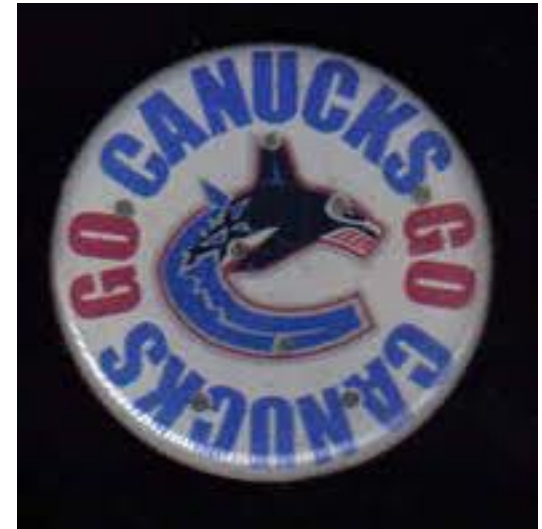


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Thank you and

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a place of mind