

Internationalising the interprofessional curriculum.

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Internationalising Scottish Undergraduate Health and Social Care Course Curricula with Australia and Japan Dr. Sundari Joseph





Aim of presentation

- The projects aimed to internationalise the curriculum for health and social care undergraduates.
- The merits of a successful model of internationalisation using an amended Miller's taxonomy (1990) will provide delegates with ideas for transferability to their contexts.





Project Teams

Australia	Japan
Margo Brewer (Curtin)	Keiko Abe (Nagoya)
Kate Duncanson (Curtin)	Hiroki Yasui (Nagoya)
Lesley Diack (RGU)	Mina Suematsu (Nagoya)
Sundari Joseph (RGU)	Hyun Jeong-Park (Sendai)
	Lesley Diack (RGU)
	Jen Haxton (NHS Grampian)
	Morag McFadyen (RGU)
	Patrick Walker (RGU)
	Sundari Joseph (RGU)





Research Questions

Australia

How can we better promote interprofessional education in remote and rural locations?

Japan

What is the Japanese experience of promoting gaming in interprofessional education?

How can Japanese and Scottish students experience similarities and differences in learning about diabetic care?



Underpinning pedagogy

Exposure

Year 1

- About
- With
- From

Immersion

Year 2

- About
- With
- From

Mastery

Year 3 and beyond


- About
- With
- From



Australian Study Design

- International Buddy Group
- Recruitment of students in rural locations in Albany and Orkney and Shetland
- Training of students and mentors for the project
- Ethics
- Data Protection





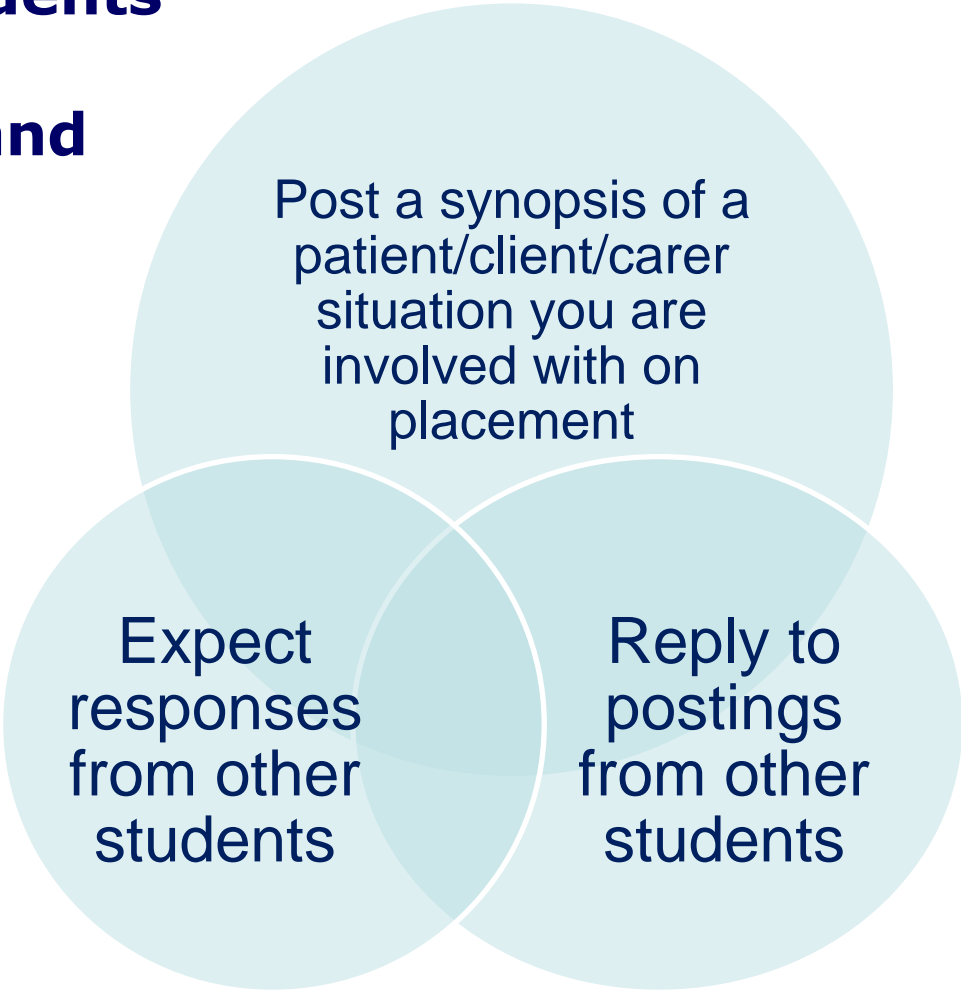
Implementation- Australian study

7 x 3rd and 4th year students

4 from Orkney & Shetland

3 from Albany

7 mentors



Post a synopsis of a patient/client/carer situation you are involved with on placement

Expect responses from other students

Reply to postings from other students

Posting from a nursing student

The patient is cared for in bed 24/7, which obviously is not good for their chest and has resulted in the patient having drop foot. A hoist was provided.

The living conditions for this patient are not ideal, however is the way they have both always lived. They live on a farm where they keep sheep and hens. During lambing season the family member takes the poorly lambs and keeps them in the house while they build up their strength, before putting them out to the field.

This is a common thing for people in ***** to do, however in this case the family member doesn't clean up after the lambs have been inside and the lambs stay in the entrance corridor where the nursing staff and home carer's walk through (which is obviously not very hygienic, since they must then go on to visit other patients). The family member has also been known to allow the hens in to the house which adds to the situation.

As well as the animal faeces there is a lot of clutter in the house, which in itself can be difficult to manoeuvre around.

Living conditions aside the NMC code of conduct for nurses in Britain states that we must provide care for patients in a non-prejudice and non-judgmental manor. Which in this case I would like to believe is being carried out.

I know from my personal experience I did not let the conditions affect my care, I respected that this is their chosen living environment. There have been complaints made by the home care staff, which was followed up. However the family member simply felt that it wasn't an issue.

My questions are:

How would you handle this situation?

Do you feel that the environment could have an affect on the patients condition?

How would you feel about having to work in this environment?

Do you have any ideas on how you could improve the situation: ie, the mans positioning etc.

If you feel you have any other views you would like to add out with my questions, please feel free to let me know what you think.

Thank you for taking the time to read my case and I hope to hear from you all soon.

Reply to posting from a social work student

In regards to the living environment of the client, I could see how this could be difficult for the home care staff. I feel what you have done in negotiating your own views of the environment in order to not interfere with the care you provided is very important, and surely would have been respected by the client also. Whilst I understand these conditions are not ideal, I worry that if the client and their family member are made to feel uncomfortable in their own home, there may be a potential risk for them to decide to stop receiving home care services, which would be to the detriment of the clients health. I was wondering about the family members ideas about the situation, and if it was the fact that the animals had always had ready access into the house that made them think it was not a concern, or if they were unaware or unable to understand the hygiene risks it may pose to the clients current condition that made the current situation not an issue?





Key Themes from Australian Study

**Geography is not
a barrier**

**Technology
enhanced learning
is valuable**

**Skill of the
facilitator**

**Learning outcomes
for practice
placements**



**Global
perspectives on
professional roles**



Japanese Study Designs

Study 1

Utilise expertise with gaming re-design to suit different context

Mixed method design testing and evaluating learning with Japanese students

Study 2

Develop online module on Diabetes

Develop webinar content



Implementation- Japanese study 1

42 students took part

3 student evaluation tools

1 Observation tool

Talking Wall focus group

Develop Japanese version of iPEG to test with students in Japan

Pilot game

Implement in IPE programme



Introducing iPEG



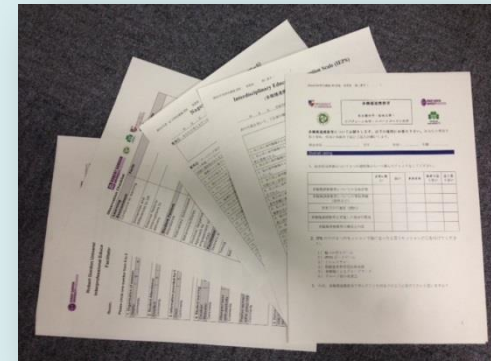
iPEG Table

Profession	Role



What we did to implement the project

- Design of scenarios for iPEG for Japanese context
- Translation into Japanese
- Faculty development for iPEG
- Design evaluation tools
- Training Standardized Patients / Daughters

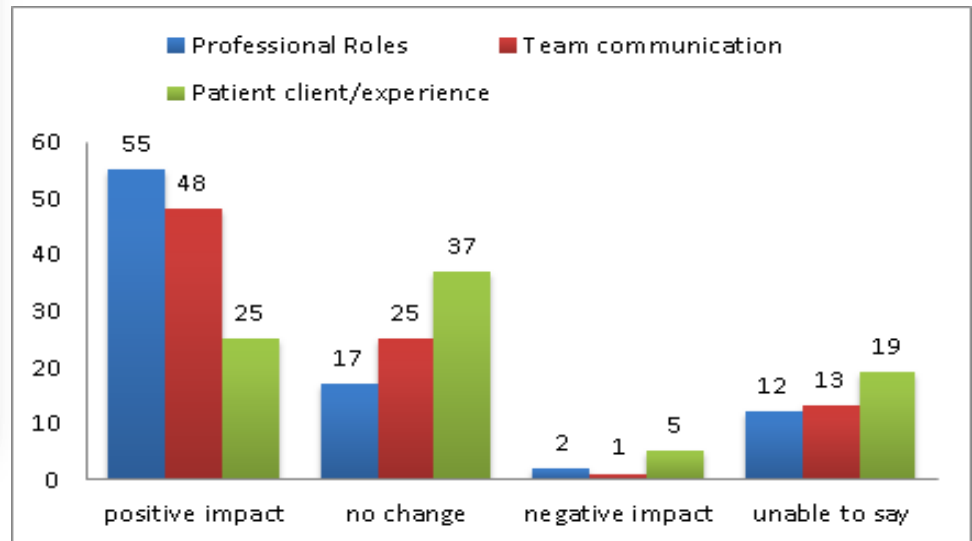




Results

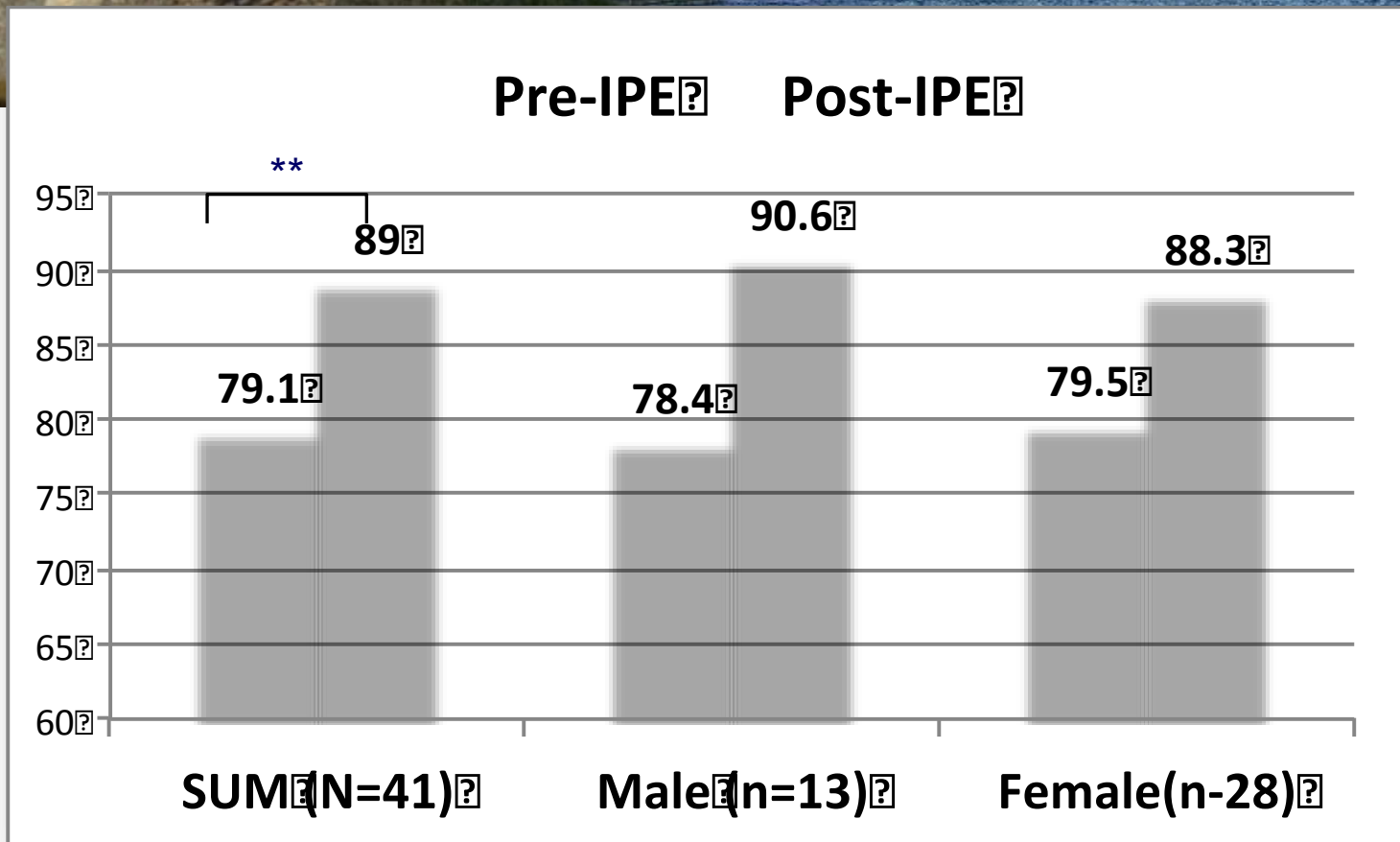
What impact has iPEG had on your understanding of professional roles; team communication & patient/client experience?

4	Positive Impact
3	No Change
2	Negative Impact
1	Unable to say



Results

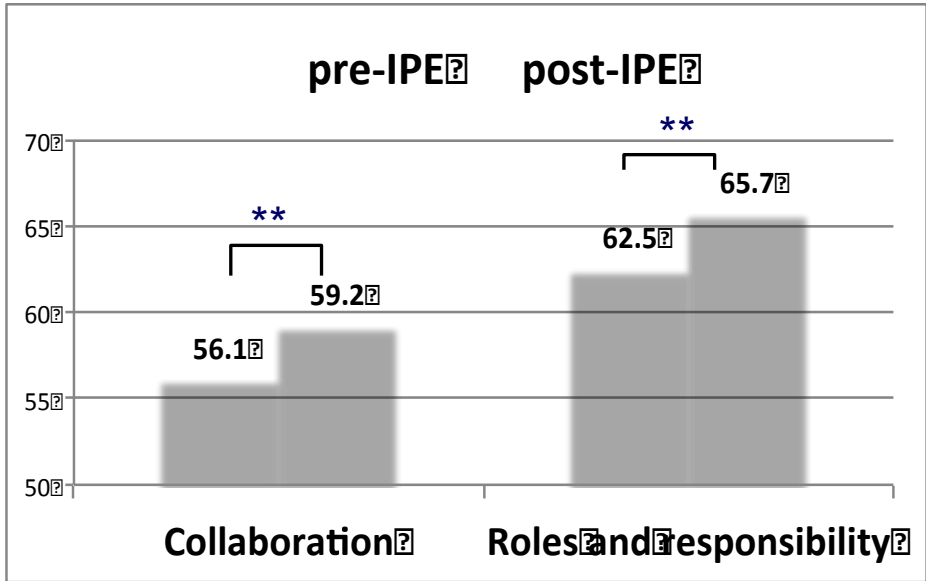
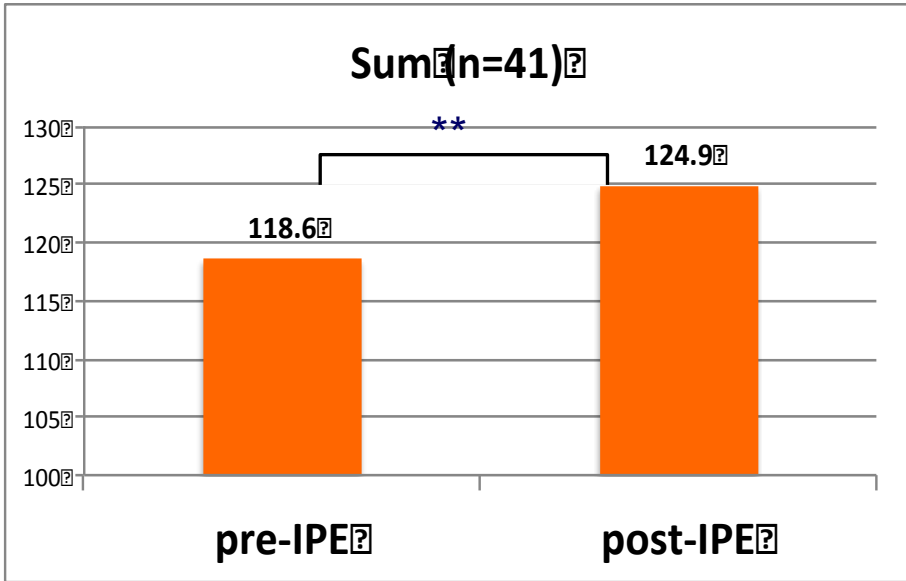
Pre and Post Interdisciplinary Education Perception Scale IEPS





Results

Pre and post NTwS (Nagoya Teamwork scale)



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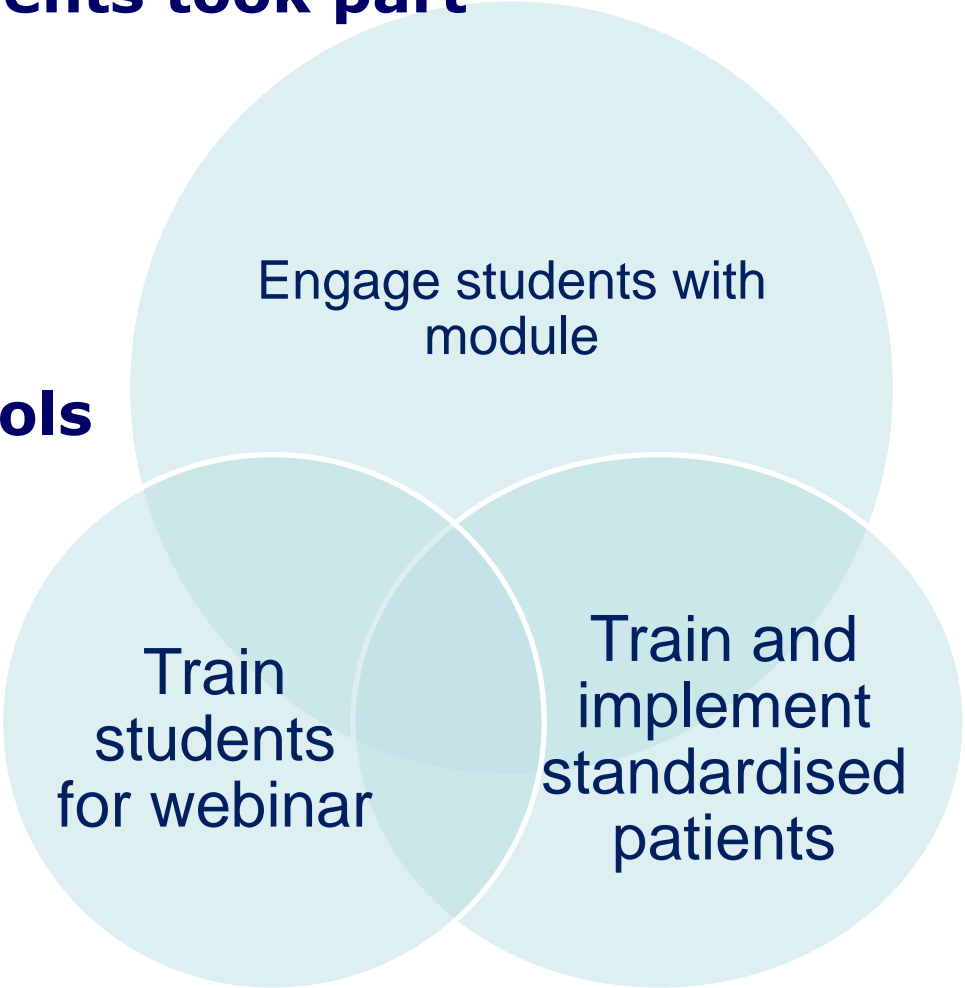
Implementation- Japanese study 2

14 3rd and 4th year students took part

7 from Nagoya

10 from Aberdeen

3 student evaluation tools



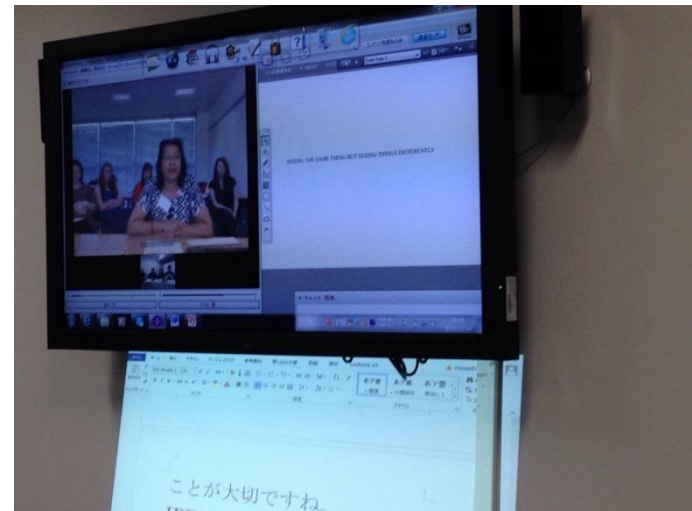
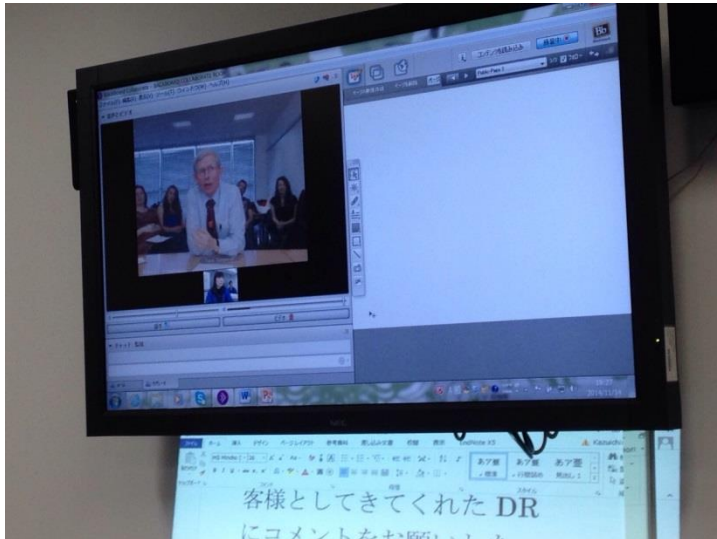
Engage students with module

Train students for webinar

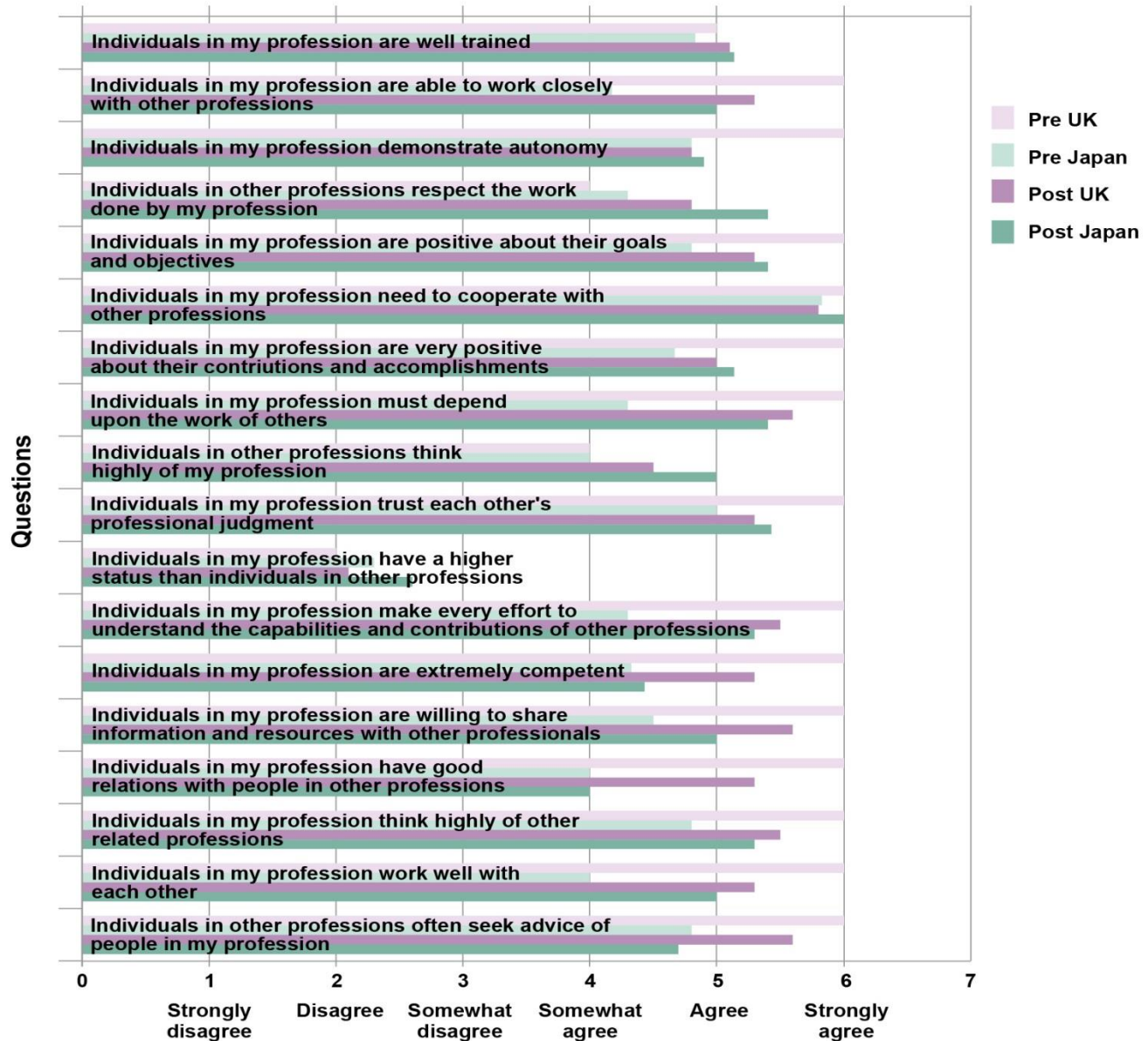
Train and implement standardised patients



Live webinar in Nagoya and Aberdeen



Interdisciplinary Education Perception Scale (IEPS) Average Pre & Post Webinar Scores for UK & Japan

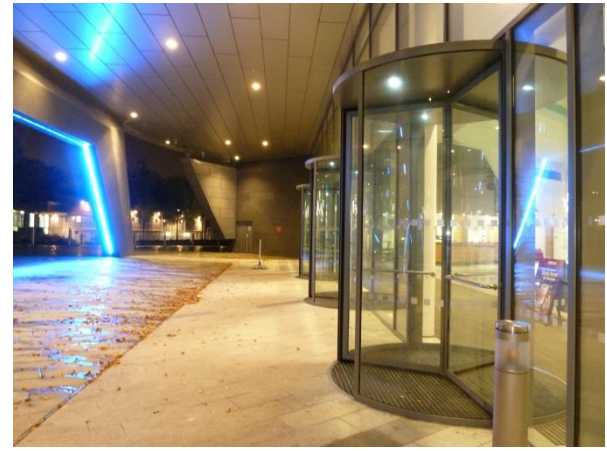




Impact of the 2nd Japanese study

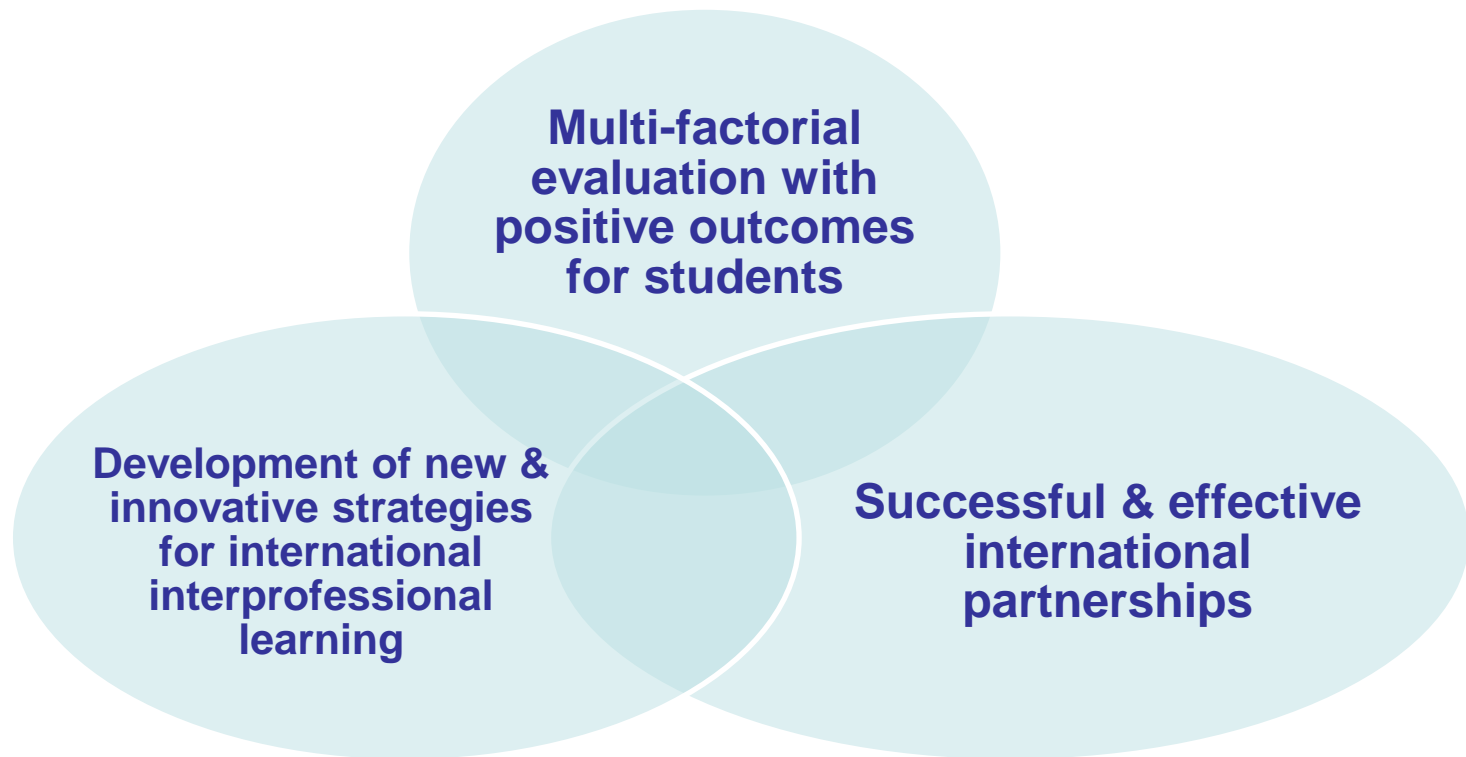
<http://www.rgu.ac.uk/news/interprofessional-experts-conclude-anglo-japanese-healthcare-research-project>

<http://www.scottish.parliament.uk/parliamentarybusiness/28877.aspx?SearchType=Advance&ReferenceNumbers=S4M-11603&ResultsPerPage=10>





What we have achieved:





Thank you for listening
Any Questions?

<http://www.ipe.org.uk/>



References & Websites

Photo: South breakwater, Aberdeen harbour CC BY-SA 2.0 Mike Pennington

DIACK, L., GIBSON, M., HEALEY, T., BOND, C. and MACKENZIE, H., 2008. The Aberdeen Interprofessional Health and Social Care Initiative- Final report. [Available online] <http://www.ipe.org.uk>

FREETH, D., HAMMICK, M., REEVES, S., KOPPEL, I., BARR, H. 2005. *Effective interprofessional education. Development, delivery and evaluation*. Oxford: Blackwell Publishing Limited

JOSEPH, S. and DIACK, L. 2014. Playing Interprofessional Games: Reflections on Using the Interprofessional Education Game (iPEG). *Journal of Interprofessional Care*. pp 1-3 [Online] Available from: <http://informahealthcare.com/doi/full/10.3109/13561820.2014.942839>

SUZUKI, T., ABE K. 2011 *Medical Interview and Simulated Patient*, Nagoya University Publisher, Nagoya.

Websites: IPE Aberdeen <http://www.ipe.org.uk/>

Centre for the Advancement of IPE (CAIPE) <http://caipe.org.uk/>