GUIDE TO INTERPROFESSIONAL EDUCATION ACTIVITIES IN PRACTICE ENVIRONMENTS

Pamela Wener, Camilla Thorne-Tjomland
Cristen Hamed, Teagan Kinsley, Francis Diaz & Lisa Mendez
Foreword

Interprofessional (IP) collaboration is one of the foundational competencies expected of all health and social care professionals. Research in practice and education has provided evidence that interprofessional education (IPE) is one of the key components to developing the six IP collaboration competencies: client-centred or patient-centred care, IP communication, role clarity, collaborative leadership, IP conflict resolution, and team functioning (CIHC, 2010). Today, most educational and professional regulatory bodies are concerned with individual competency development. Students, preceptors/supervisors or professionals may use this document to guide individual and collective IP collaboration competency development (Lindgard, 2012). The document describes 24 activities to empower students and the practice-based educators and professionals working to provide better health and social care. The core intent of this document is for groups of students and/or professionals working with individuals who seek services to further develop their individual and collective IP competencies by learning about, with, and from, each other (ref). The University of Manitoba and the College of Rehabilitation Sciences (CoRS) specifically, have developed an excellent variety of classroom-based IP education opportunities. This document complements these classroom-based activities by providing a guide to extending IPE into practice-based, clinical and community settings. In creating this guidebook, we also hope that reading and experimenting with some of these IPE activities makes you, the reader, think of how you might modify these activities to create practice-based IPE opportunities that are relevant to your specific practice-based environments. Lastly, we hope that with exposure to these IPE activities, you will see the importance of offering these types of learning opportunities to your future students and colleagues to ensure that clients and patients receive the right care, from the right person, at the optimal time.

The document was developed by an educator/researcher along with an IP group of therapists who were, at the time of development, students within the three entry-to-practice programs of CoRS: Occupational Therapy, Physical Therapy, and Respiratory Therapy. Working together over the course of a year, we too became an interprofessional group who was able to collectively do what we could not have done individually. We hope this guidebook encourages you to engage with your collaborators of other health professions to work together to provide the best patient/client/person/people care possible.

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• Health Promotion |
| Team Functioning | • Conflict  
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• Client-centredness  
• Role reversal  
• Team building activity | • Presentation  
• Scope of practice  
• Chronic diseases  
• Driving  
• Health promotion  
• Social isolation seniors | • Suffering  
• Groups  
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• Role reversal | • Giving and receiving feedback  
• Conflict resolution | • Rounds presentation |
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EXPOURE

E 1 Shadowing

Interprofessional Collaboration (IPC) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC education activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:

- Role Clarification
- Team Functioning
- Interprofessional Team
- Conflict Resolution
- Interprofessional Communication
- Collaborative Leadership
- Client-centred Care

2. Activity Summary

Students will have the opportunity to meet with different health professionals in order to learn more about the scope and roles of different health professions within a given setting.

3. Learning Objective:

Purpose:

1. To gain exposure to the different health professions’ scope of practice and interact with students from different professions
2. Gain a deeper understanding of role differentiation within the specific site, and begin to consider how those roles may work together to help meet client goals
**Expected outcome:** Check all that apply.

- [ ] Describe
- [X] Explain
- [ ] Demonstrate
- [ ] Evaluate
- [ ] Critique

1. By the end of the activity, students will be able to describe the roles of three different health professionals working at their site
2. By the end of the activity, students will have a broad understanding of the roles of three health professions different from their own, and how they work with one another to help clients’ meet their goals.

**4. Steps to completing learning activity:** Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- [ ] Determine other students also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.
- [ ] As a group of students, list at least 3 different professions you would like to clarify the roles of.
- [ ] With your educator/supervisor, identify individuals within those 3 different professions.
- [ ] Connect with these individuals to determine their availability to meet with your group. Arrange a meeting time between your group of students and each individual.
- [ ] Develop a list of learning objectives you would like discussed in each of your meetings. You can send these objectives to the individuals you are meeting with beforehand so they are prepared.
  - Some examples of objectives could include: Professional scope of practice, an example of a setting where they have worked with your own profession, or a list of their potential practice settings, etc.
- [ ] Meet with each professional individually in your group.
- [ ] After all the meetings, debrief with your group of students on the following:
  - Based on what you learned from your meetings with 3 different professionals, describe how your role relates to the other professions.
  - Describe how your role in your profession differs from the other professionals
  - After determining this for yourself, discuss your role and how it relates to the professionals you met with the other students in your group and listen to what they learned
  - Come up with a case example of an instance of how you might all work collaboratively together.
- [ ] 7. Individually, complete the reflection sheet.
5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

---

**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

---

**Practice Setting:** Check all that apply.

- [ ] Community Agency
- [ ] Hospital
- [ ] Other ______________

- [ ] Personal Care Home
- [ ] School
- [ ] Primary Care

**Student Professionals Involved:** Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Other ______________

- [ ] Nurse Practitioner
- [ ] Occupational Therapy
- [ ] Patient/Client Pharmacy

- [ ] Physical Therapy
- [ ] Physician/Surgeon
- [ ] Physician Assistant

- [ ] Practice Managers
- [ ] Psychologist
- [ ] Rehabilitation Assistant

- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers

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Professionals Involved: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Occupational Therapy
- [ ] Patient/Client
- [ ] Pharmacy
- [ ] Physical Therapy
- [ ] Physician/ Surgeon
- [ ] Physician Assistant
- [ ] Practice Managers
- [ ] Psychologist
- [ ] Rehabilitation Assistant
- [ ] Respiratory Therapy
- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers
- [ ] Other ________________________________

6. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
E 2 Conflict

Interprofessional Collaboration (IPC) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

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1. Competencies:
   - Role Clarification
   - Team Functioning
   - Interprofessional Team Conflict Resolution
   - Collaborative Leadership
   - Interprofessional Communication
   - Client-centred Care

2. Activity Summary

Learning to manage conflict is an important skill to developing professional relationships within the workplace. In this activity, a group of three or more students of different professions will learn how to manage conflict in the workplace.

3. Learning Objective:

Purpose:

1. Students will explore their own conflict management styles and learn new skills to diffuse a conflict in the workplace.
2. Students will develop skills within the IPE competency interprofessional team conflict resolution by practicing working through conflict case studies.
**Expected outcome:** Check all that apply.

- [ ] Describe  
- [ ] Explain  
- [x] Demonstrate  
- [x] Evaluate  
- [x] Critique

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<td>1.</td>
<td>By the end of the activity, students will have critically self-evaluated their style of managing conflict in the workplace.</td>
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<tr>
<td>2.</td>
<td>By the end of the activity, students will feel more comfortable managing interprofessional conflict.</td>
</tr>
</tbody>
</table>

**4. Steps to completing learning activity:** Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- [ ] Determine other students also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

- [ ] Individually, take one of the three provided questionnaires to discover your individual conflict resolution styles.
  
  
  
  - United States Institute of Peace Online Conflict Styles Assessment Questionnaire: [https://www.usip.org/public-education/students/conflict-styles-assessment](https://www.usip.org/public-education/students/conflict-styles-assessment)

- [ ] Review the presentation from the Registered Nurses Association of Ontario prior to or during your meeting with your group.
  
As a group of students, discuss the different methods of conflict resolution. Five possible methods of conflict resolution are collaborator, competitor, avoider, accommodator, and compromiser.

**Image from: https://www.negotiations.com/definition/negotiation-styles/**

- Reflect on the benefits and drawbacks of each method.
- Discuss different situations on placement or in your personal lives where you had to overcome conflict. Comment on your individual conflict resolution style.

Using the provided **scenarios**, practice dealing with conflict and applying the methods in a group.

Debrief with your group of students and supervising healthcare provider or department head. Debrief the following ideas:

- Reflect on what you learned about your personal styles of conflict resolution. How will your methods help or hinder your ability to work in an inter-professional setting?
  - How does learning conflict resolution skills affect you on a personal and professional level?

Individually, complete the **reflection sheet**.

5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*
**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

**Practice Setting:** Check all that apply.

- [ ] Community Agency
- [ ] Hospital
- [ ] Other __________________________

**Student Professionals Involved:** Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse

- [ ] Nurse Practitioner
- [ ] Occupational Therapy
- [ ] Patient/Client
- [ ] Pharmacy

- [ ] Physical Therapy
- [ ] Physician/Surgeon
- [ ] Physician Assistant

- [ ] Practice Managers
- [ ] Psychologist
- [ ] Rehabilitation Assistant
- [ ] Respiratory Therapy

- [ ] Practice Managers
- [ ] Psychologist
- [ ] Rehabilitation Assistant
- [ ] Respiratory Therapy

- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers

- [ ] Other __________________________
Professionals Involved: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Occupational Therapy
- [ ] Patient/Client
- [ ] Pharmacy
- [ ] Physical Therapy
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- [ ] Physician Assistant
- [ ] Practice Managers
- [ ] Psychologist
- [ ] Rehabilitation Assistant
- [ ] Respiratory Therapy
- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers
- [ ] Other

6. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
Conflict scenarios

Choose one of the two scenarios below to practice working through conflict. As much as possible, incorporate what you learned about yourself using the conflict resolution style questionnaire you completed at the beginning of this activity.

Scenario 1:
One afternoon on the Medicine ward in a regional hospital in Northern Manitoba, two therapists were sent a consult that says, “Please assist with Mrs. Jones’ discharge planning”. Both therapists arrived on the Medicine ward together and were surprised to know that the client/patient is getting discharged in three hours.

Mrs. Jones is an elderly woman who had a fall that caused a hip fracture that has been resolved surgically using ORIF. For the past week since the surgery, Mrs. Jones has not been attending physical therapy sessions saying she is in too much pain to do anything causing a functional decline in ambulation. Mrs. Jones has also been seen by the occupational therapist who determined that she requires adaptations to her home environment (e.g., raised toilet seat, tub transfer bench) to allow for independence despite the decline in functional abilities; however, Mrs. Jones has very limited funding options at this time.

This is not the first time the therapists were given a consult for discharge planning for the same day and both therapists feel that it is time to bring this up to the manager of the ward.

Roleplay the conversation between the ward manager and the therapists.

Scenario 2:
Three healthcare providers are planning a weekly chronic disease management group to address the needs of the community. It is expected that there will be approximately eight participants in each weekly group that will run for four weeks.

In planning the group, one of the providers would like to focus on building relationships among the participants and between the participants and the providers to foster a therapeutic alliance. One of the providers believe that given the short duration of the group, the group should be focused on accomplishing the intended goals of the group – that is, how to live with and manage chronic disease in the community. One of the providers believe that the group should acknowledge that a majority of the participants would like to discuss dietary and safety concerns during the screening process to be part of the group.

Roleplay the conversation between the healthcare providers in order to resolve this conflict.
E 3 Communication Styles

**Interprofessional Collaboration (IPC) Learning Activity**

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

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1. **Competencies:**
   - Role Clarification
   - Interprofessional Team
   - Conflict Resolution
   - Interprofessional Communication
   - Team Functioning
   - Collaborative Leadership
   - Client-centred Care

2. **Activity Summary:**

   Communicating with other professionals in a multi-disciplinary setting is crucial to improving patient care. Communication needs to be direct, effective, and accurate. This activity will guide three or more students to explore tools that improve interprofessional communication.

3. **Learning Objective:**

   **Purpose:**

   1. Explore and develop the communication skills of each participant.
   2. Develop skills in the IPE competency areas of team functioning and interprofessional communication through team exploration and discussion of different interprofessional communication styles.
Expected outcome: Check all that apply.

- [ ] Describe
- [x] Explain
- [x] Demonstrate
- [x] Evaluate
- [x] Critique

1. By the end of the activity, students will be able to explain and critique the methods of SBAR, Callouts and Huddles.
2. By the end of the activity, students will have built capacity in the IPE competency areas of team functioning and interprofessional communication through the opportunity to work with students from different backgrounds, and consider and practice different communication styles.

4. Steps to completing IPC activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- [ ] Determine other students also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

- [ ] As a group of students, research the methods of SBAR, Callout and Huddles as used in the healthcare profession to improve interprofessional communication.
  - Focus on the benefits of each method and in what situations each would be appropriate to use.

- [ ] Brainstorm a list of at least 3 situations each (at least 9 situations total) where each method of interprofessional communication can be applied to your current setting.
  - For example: Communication is necessary to inform physicians and charge nurses when a patient has completed their therapy and is ready for discharge or is on the discharge list and has not completed their therapy.

- [ ] Select 1-2 of the situations to practice in your group for each of the communication tools. Take turns being the evaluator, the communicator and the recipient of information.

- [ ] Bring your new learned skills into practice by using on placement with other team members at your site. Dedicate a day to practice independently.
  - Complete a self-evaluation after using a communication tool. Focus on what you did well and on where you need improvement.
Debrief with students in your group and supervising healthcare provider or department head on the following:

- Reflect on your independent experiences using the communication tools in a group discussion. How did your interprofessional interaction carry out? Is there anything that you need to improve on?
- Based on what you learned from this activity, how does each tool improve your communication skills?
- Discuss the benefits of using the communication tools over the communication strategies you used before beginning this learning activity.
- After completing the activity, reflect on how your communication skills have improved in a group discussion.

Individually, complete the reflection sheet.

5. **Site:** State the primary and secondary sites of the education activity. This is the location where your interprofessional team will gather and complete the activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

**Practice Setting:** Check all that apply.

- Community Agency
- Personal Care Home
- Private Home
- Hospital
- Primary Care
- School
- Other

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Student Professionals Involved: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Physical Therapy
- [ ] Practice Managers
- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers
- [ ] Other ________________________________

Professionals Involved: Check all that apply.

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- [ ] Rehabilitation Assistant
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- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers
- [ ] Other ________________________________

6. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
Self-evaluation form

Communication tool chosen: ____________________________________________

Other team members you used the communication tool with

____________________________________________________________________

Brief description of the clinical encounter in which you used the communication tool

____________________________________________________________________

When using the chosen communication tool, what is your area of strength?

____________________________________________________________________

When using the chosen communication tool, identify an area for improvement

____________________________________________________________________
Interprofessional Collaboration (IPE) Learning Activity

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1. Competencies:
   ✓ Role Clarification  □ Interprofessional Team  □ Interprofessional Communication
   ✓ Team Functioning  □ Conflict Resolution  □ Collaborative Leadership  □ Client-centred Care

2. Activity Summary

   In this activity, students from different professions will have the opportunity to discuss stereotypes about their profession as a role clarification exercise.

3. Learning Objective:

   Purpose:

   1. Students will consider stereotypes of their own and of different health professions
   2. Through discussion with students from different health backgrounds, students will develop skills in the IPE competencies of role clarification and team functioning.
Expected outcome: Check all that apply.

✓ Describe ✓ Explain □ Demonstrate □ Evaluate □ Critique

1. By the end of this activity, students will be able to name three stereotypes about their profession and describe how, in an evidence-based manner, these stereotypes are untrue. They will also be able to name three stereotypes about each of the other professions completing the activity.

2. By the end of the activity, students will have deepened their understanding of the IPE competency role clarification through discussions about roles with students from different backgrounds.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

□ Determine other students also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

□ Contact other students to arrange an initial meeting to plan the timeline for the activity (e.g., when you will meet to discuss your findings). This activity can be completed with one other student, but the learning experience will be richer with more students.

□ Meet with the students to review expectations for the activity. Set a date for when you will meet to discuss your findings.

□ Complete the following individually:
  ○ Come up with three stereotypes you have heard about your own profession (for example, OTs only role is to help people find jobs, or RTs only work in the hospital).
  ○ For each stereotype, come up with the following:
    ▪ Evidence proving that it is false. For example, a textbook which discusses the scope of OT practice or an article describing RTs role in community settings.
    ▪ For each stereotype, write a few sentences describing your own opinion on how people, especially other health professionals, believing this could be harmful to the profession and/or patient care.

□ Meet with other students to discuss findings. Be sure to ask questions when you need clarification so that you are able to confidently correct people in the future if you hear them saying things about a profession that are untrue!

□ Complete the reflection sheet.
5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*


**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*


**Practice Setting:** Check all that apply.

- Community Agency
- Personal Care Home
- Hospital
- Primary Care
- Private Home
- School
- Other

**Student Professionals Involved:** Check all that apply.

- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Nurse Practitioner
- Occupational Therapy
- Patient/Client
- Pharmacy
- Physical Therapy
- Physician/Surgeon
- Physician Assistant
- Practice Managers
- Psychologist
- Rehabilitation Assistant
- Respiratory Therapy
- Social Work
- Speech Therapy
- Spiritual care
- Teachers
- Other
Professionals Involved: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
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- [ ] Homecare
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- [ ] Spiritual care
- [ ] Teachers
- [ ] Other

6. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Intermediate
- [ ] Advanced beginner
- [ ] Advanced intermediate
- [ ] Expert

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E 5 Client Centredness

Interprofessional Collaboration (IPE) Learning Activity

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1. Competencies:
   - Role Clarification
   - Team Functioning
   - Interprofessional Team Conflict Resolution
   - Interprofessional Communication
   - Collaborative Leadership
   - Client-centred Care

2. Activity Summary

In this activity, students will review a case study that challenges the ability to be client-centred while keeping the client safe.

3. Learning Objective:

Purpose:

1. Students will collaboratively explore the concepts of client-centredness, client safety, and who is the “client” when dealing with families.
2. Students of each profession will provide the point of view of their profession to create a well-rounded response to the questions and facilitate development of the client-centred approach.
Expected outcome: Check all that apply.

- [✓] Describe  [✓] Explain  [□] Demonstrate  [□] Evaluate  [□] Critique

1. Using the case study, students will be able to name who the clients are in the case study and describe how they might approach those clients.
2. Students will have generated a list of two possible strategies for dealing with entire families as opposed to single clients.
3. Students will have generated two strategies for balancing client-centredness with safety of the client.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- [□] Determine other students also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.
- [□] Plan a meeting time with students to review and discuss the case study. Plan for the meeting to take around an hour.
- [□] Prior to the case study review and discussion, review:
  - The principle of client-centredness as it relates to your profession
  - Your profession’s obligations with regards to client safety
  - Read the case study
  - Research anything on the case study that you are unfamiliar with
- [□] Meet as a group and discuss the following:
  - Discuss your profession’s definition of client-centredness and how that might look in practice
  - Discuss your profession’s obligations with regards to client safety and how that might look in practice
  - Identify major barriers to client-centredness and safety when treating Helena P. If it were up to Helena, what would her discharge look like? What are some possible issues with her ideal discharge scenario?
  - In this case study, who is the “client”? Why might it be important to involve Helena’s family in discharge planning? What needs to be considered from a legal perspective when involving family in care?
  - Based on the information you know about Helena, what do you think is the safest discharge plan?
  - How can you work with this plan to make it as client-centred as possible? Provide two examples.
Occasionally, health professionals must work with families that are in conflict. Describe two strategies for managing families that do not agree on discharge plans.

Discuss other possible scenarios that you could see practicing in a client-centred manner being challenging.

Once your group has finished your discussion, ask your educator(s) to review your answers to provide their insight.

Complete the reflection sheet.

5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

**Practice Setting:** Check all that apply.

- [ ] Community Agency
- [ ] Personal Care Home
- [ ] Private Home
- [ ] Hospital
- [ ] Primary Care
- [ ] School
- [ ] Other
Student Professionals Involved: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Physical Therapy
- [ ] Practice Managers
- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers
- [ ] Other ____________________________

Professionals Involved: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Occupational Therapy
- [ ] Patient/Client
- [ ] Pharmacy
- [ ] Physical Therapy
- [ ] Physician Assistant
- [ ] Physician/Surgeon
- [ ] Practice Managers
- [ ] Psychologist
- [ ] Rehabilitation Assistant
- [ ] Respiratory Therapy
- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers
- [ ] Other ____________________________

6. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert

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Case Study

Geriatric Rehabilitation Referral

Name: Helena P.
Age: 83
Diagnosis: R shoulder subluxation

Social

Helena, a retired teacher, lives alone in a two-storey home. Her husband, Don, passed away seven years ago. Don and Helena have three daughters, and seven grandchildren. Helena’s daughter, Jackie, and her husband, Brian, live nearby in Winnipeg with their two children who are 17 and 22. Helena’s two other daughters, Cindy and Lisa, live out of province. Since Don’s passing, Jackie and Brian and their children have been primary caregivers for Helena. They do her lawn care and snow removal, bring her meals 2-3 times per week and do her laundry.

Prior to Don’s passing, they enjoyed travelling; but since his passing, Helena just drives herself to Jackie and Brian’s cottage two hours away on Lake Winnipeg. Within the city, she drives herself to a once-weekly water aerobics class, and to the convenience store to pick up small groceries, although Jackie and Brian do the bulk of her shopping. Helena has very little social contact since her two best female friends passed away recently and reports feeling isolated.

Medical Status

Helena fell and subluxed her shoulder after tripping on a throw carpet. This was her first fall that she had been hospitalized for, but Jackie reports that she suspects her mom has fallen in the past based on bruises that Jackie has noticed, although Helena denies this. Prior to her hospitalization, Helena had been in relatively good health. Although no surgery was necessary, the current hospitalization has lasted three weeks long thus far and has resulted in a considerable amount of deconditioning. She is currently not able to ascend or descend stairs.

Physical Environment

Helena lives in a 2-storey home with a three-step entry into the front door. Her bedroom is on the second floor, and her laundry is in the basement. Her stairs all have a railing on one side of the staircase. The house is carpeted throughout, with throw rugs in every room. Helena has never had her home assessed and does not have any grab bars or any other adaptive equipment installed.

Discharge Planning

Helena is in geriatric rehabilitation and the team is hoping to discharge her in a week. Helena is adamant that she will return home, and does not want home care because “she is fine on her own; and if she isn’t, Jackie will help”. The following concerns have been raised about her discharge:

- Safety in the kitchen. During a kitchen assessment, Helena failed to turn off the oven after making soup.
- **Transfers.** Although she is able to transfer independently, she requires standby assist because she still looks “wobbly” at times and often forgets to reach for grab bars.

- **Driving.** Helena still has a drivers’ license but hospital staff are concerned about her ability to drive due to decreased ability to transfer in and out of the car, decreased shoulder mobility and possibly impaired cognitive abilities.

Helena’s daughters have been actively involved in her rehab process. Here are their concerns:

**Jackie:** Jackie does not want her mother to be discharged home. Jackie hopes that Helena can be discharged to an assisted living facility. Jackie reports that her and Brian are feeling overwhelmed by the amount of care that her mother requires, and she states that she is constantly worrying about her mother because she doesn’t think the house is safe. Jackie and Brian’s 17-year old son currently spends a lot of time with Helena, but is moving to Toronto for university in September and Jackie fears that if Helena is not in a more suitable environment by then, they will have to force her to move, which Jackie is hoping to avoid. Jackie and Brian have discussed home care or assisted living with Helena in the past but Helena refuses to consider either.

**Cindy:** Cindy firmly believes that her mother should be allowed to do “whatever makes her happy”, including driving and choosing where to live, and tends to take Helena’s side in most arguments. Her and Jackie have argued in the past about what is the best option for Helena.

**Lisa:** Lisa stated that she would be happy to do whatever the health professionals advise, but agrees that at least home care would be necessary. She tends to mediate arguments between Cindy and Jackie.
E 6 Communication Methods

**Interprofessional Collaboration (IPC) Learning Activity**

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC learning activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. **Competencies:**
   - Role Clarification
   - Team Functioning
   - Interprofessional Team
   - Conflict Resolution
   - Collaborative Leadership
   - Interprofessional Communication
   - Client-centred Care

2. **Activity Summary**

   In this activity, students will determine barriers that may be working against effective communication in three different case scenarios. After determining these barriers, students will discuss ways to minimize the barriers and achieve effective communication in delivering care.

3. **Learning Objective:**

   **Purpose:**

   1. To determine barriers that may be limiting communication and ultimately client-centred care
   2. Explore strategies for minimizing or managing communication barriers with clients.
Expected outcome: Check all that apply.

✓ Describe ✓ Explain □ Demonstrate ✓ Evaluate ✓ Critique

1. Students will be able to understand and define common barriers that they may be exposed to clinically
2. Students will be able to describe three different approaches to managing communication barriers experienced with clients

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

□ This activity can be done in groups of two. Begin by finding another student currently on placement at the same site as you. They can be from a different profession or the same as you. If you are unaware of any other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.

□ Once you have found a student, coordinate a time that works for both of you to meet and discuss the following cases.

□ Review this list of commonly experienced communication barriers and become familiar with them.

  o Barriers:

    a) Language barriers – The use of different languages or medical terminology above clients education level can limit the effectiveness of communication

    b) Psychological barriers – psychological state can limit the effectiveness of the communicator to deliver/listen while delivering care. (Remember this could be experienced on both ends of communication, both health care provider and client)

    c) Physiological barriers – physiological deficits from patient condition may limit the ability to listen and receive messages

    d) Physical barriers – physical barriers can be described as distance between, or position when interacting when a patient.

    e) Systemic barriers – barriers that are ingrained within organizations or structures. These could be barriers in system set up/delivery that limit effective communication to patient population.

    f) Attitudinal barriers – These are behaviours or perceptions that limit an individual from communicating. For example, these may be personal emotional conflicts or resistance to change.

After critically thinking about the barriers that may be involved with either the health care provider or client, read over the case scenarios and take time to evaluate some concerns you have about each case.

With your partner, discuss the possible barriers that may be present in each case and come up with ways to achieve effective communication.

After discussing effective ways to address the barriers that may be present in the cases, debrief the following:

- Were there any cases that you found it difficult to address all barriers? If so, consider asking your preceptors on ways in which they would approach delivering care in these situations.
- From what you know now do you believe the health care system as a whole is properly equipped to minimize these barriers to communication?
- If no, give two examples of ways you think communication could be more effective between patient and health care provider.
- From your experience clinically, have there been instances where effective/ineffective communication have been displayed. Discuss your experience with your partner and determine possible solutions to the scenarios.

Complete the reflection sheet.

5. Site: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: St. Boniface Hospital, Cardiology and Emergency departments.

Population: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.
### Practice Setting: Check all that apply.

- [ ] Community Agency
- [ ] Personal Care Home
- [ ] Private Home
- [ ] Hospital
- [ ] Primary Care
- [ ] School
- [ ] Other ____________________________

### Student Professionals Involved: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Occupational Therapy
- [ ] Patient/Client Pharmacy
- [ ] Physical Therapy
- [ ] Physician Assistant
- [ ] Physician/Surgeon
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### Professionals Involved: Check all that apply.

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- [ ] Social Work
- [ ] Speech Therapy
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- [ ] Teachers
- [ ] Other ____________________________

### 6. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Advanced
- [ ] Intermediate
- [ ] Advanced
- [ ] Expert
- [ ] Beginner
- [ ] Advanced
- [ ] Intermediate
- [ ] Advanced
- [ ] Expert

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Communication Scenarios

1. Peter is a 12 year-old who has just been diagnosed with asthma. He has a great love of sports and just made the summer-league soccer team he had been trying out for. You gather from his parents that Peter sleeps, eats, and breathes soccer and appears to have little care for much else in his life. They are also ecstatic that he has been chosen to play for an elite soccer club throughout the summer. As a health care provider it is your job to explain the importance of being in control of his asthma, and educate him and his parents on potential life changes that will accompany the new diagnosis.

Come up with some potential barriers that you may encounter when trying to educate Peter and his family and how you will address them.

2. Julie, a recent immigrant to Canada who speaks little English, has just received news that she has stage II multiple myeloma after visiting the emergency department with a left arm fracture. You notice that she seems to be having a hard time handling the new diagnosis, but does not show any interest in the forms of medical treatment available for the cancer. You know that there is no cure but there are medical interventions that can allow her quality of life to be maintained. It frustrates you that she seems so uninterested in evidence-based practices that could help improve her condition. You address Julie with assertiveness and tell her she is silly not to consider her medical options.

Consider Julie’s situation. What are some of the potential causes to her disbelief and refusal of treatment? What barriers may be present when trying to deliver care to Julie?

3. Thomas is a 55 year-old man with type II diabetes, who has been having trouble maintaining and being in control of his diabetes. After a few visits with him, you are growing more and more concerned with his disinterest in his health and being in control of his medical condition. You have had a long, hectic day, before meeting Thomas for your fourth visit. In the first few minutes of your encounter you determine there has been no change in Thomas’s interest or prognosis, you decide you can spend your valuable time elsewhere and are very short with him and have grown disinterested yourself. He never seems to ask any questions during your visits but nods his head a lot to what you are saying. You know he is married but never brings his wife to his visits. He has been employed at a local manufacturing company since the age of 17.

What are some of the barriers that Thomas may be facing when it comes to controlling his diabetes? Do you think he simply does not care about his health, or is it possible there are other factors contributing to his seeming disinterest? What are some other concerns involving the encounter between you and Thomas? Finally, give some examples of how this encounter could have been handled more appropriately.
E 7 Role Reversal

Interprofessional Collaboration (IPC) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

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1. Competencies:
   ✓ Role Clarification  ✓ Interprofessional Team Conflict Resolution  □ Interprofessional Communication
   ✓ Team Functioning  □ Collaborative Leadership  □ Client-centred Care

2. Activity Summary

In this activity, students (two or more) will place themselves with a student from a different profession’s shoes and develop a care plan that addresses what they believe would be concerns of the opposite profession. As clinicians, it is important to be aware/mindful of the concerns and/or goals of other professions involved in delivering care to your patients to better develop a team-oriented plan that is best for the patient.

3. Learning Objective:

Purpose:

1. To critically describe and explain the goals/concerns of another profession that you may find yourself working closely with
2. To gain a deeper understanding of the roles and perspectives of other health professionals
Expected outcome: Check all that apply.

- ✓ Describe
- ✓ Explain
- ✓ Demonstrate
- □ Evaluate
- □ Critique

1. Students will work collaboratively to come up with a care plan including two SMART goals for each patient, which meets the clinical goals of all professions while remaining client-centred.
2. Students will be able to name and describe two new things that they have learned about the scope of practice of the students that they were working with.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- □ Find other students from a different profession (at least one, but the more you have the more insight you can gain) on placement that you are interested in learning more about their role and scope clinically. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.

- □ Once the group has been created, double check if you are working with any of the same patients. If possible, use a patient that you have both been seeing to develop your care plan. If that is not possible, use the case provided.

- □ If you find you do not know how any of the other student(s) you have chosen to work with would develop a care plan, you may do some background research before meeting to discuss your mutual patient or case.

- □ Take 10-15 minutes to put yourself in the other professions shoes and consider the following questions:
  - o What would be my main concern while developing a care plan and delivering care to this patient?
  - o What are some questions that I may ask my patient to gain an understanding of how to best deliver care to them?

- □ After critically thinking and responding to the above questions, take turns discussing them with each other. Take the time to provide constructive feedback to each other’s responses. This is a great opportunity to learn from each other.

- □ Based on all student responses what did you find out?
  - o Do any of the concerns overlap?
  - o Is their differing perceived importance between professions on certain medical interventions?
    - ▪ If yes, take the time to discuss reasons why there is a difference of opinion? Can a consensus be met?
From what you have learned from each other, work together to create two SMART goals that appropriately address the main concern of both professions while keeping the patients’ wants/needs at the forefront.

- Note: SMART goals must be:
  - Specific – Answers who, what, where, when, why?
  - Measurable – success towards achieving goal can be measured
  - Attainable – realistic and reasonable when it comes to the patient
  - Relevant – aligned with current task, and focused
  - Time-framed – clearly defined with a target deadline

After developing the goals and a well-suited care plan, debrief the following questions as a group:

- Discuss each other’s scopes of practice; is there any overlap between professions?
- From what you learned about the roles of other professions, describe a scenario where you may be able to utilize other professions to meet patient needs.
- Did you find it difficult to come up with a plan that met both professions’ concerns while also keeping patient concerns/needs/wants in mind?
  - How did you determine the most important clinical goal moving forward for the patient? Coming to a consensus is often hard when there are many professions involved as well as different personalities. The difficulty also increases with increased patient complexity.
  - Were there any strategies you used to prioritize needs in order to develop your goals?
- What team dynamics, can you attribute to your success during this activity?
  - Examples include: personalities within the group, nature of the case, work environment
- What team dynamics can you attribute to any difficulty during this activity?
  - Examples include: personalities within the group, nature of the case, work environment
- What were some important skills that you found were necessary when it came to developing the care plan and goals within an interprofessional team?
- You may want to include your preceptor in the discussion, as they may be able to help guide discussion or provide you with their own insight.

Complete the reflection sheet.
5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*


**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*


**Practice Setting:** Check all that apply.

- [ ] Community Agency
- [ ] Hospital
- [ ] Other

  □ Personal Care Home
  □ Primary Care
  □ School

**Student Professionals Involved:** Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Other

  □ Nurse Practitioner
  □ Occupational Therapy
  □ Patient/Client Pharmacy
  □ Physical Therapy
  □ Physician/Surgeon
  □ Physician Assistant
  □ Practice Managers
  □ Psychologist
  □ Rehabilitation Assistant
  □ Respiratory Therapy
  □ Social Work
  □ Speech Therapy
  □ Spiritual care
  □ Teachers
Professionals Involved: Check all that apply.

☐ Audiology
☐ Dietitian
☐ Healthcare Aide
☐ Homecare
☐ Nurse
☐ Nurse Practitioner
☐ Other

☐ Occupational Therapy
☐ Patient/Client
☐ Pharmacy
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☐ Physician Assistant
☐ Practice Managers
☐ Psychologist
☐ Rehabilitation Assistant

☐ Respiratory Therapy
☐ Social Work
☐ Speech Therapy
☐ Spiritual care
☐ Teachers

6. Stage of Education: Check all that apply.

☐ Beginner
☐ Advanced
☐ Intermediate
☐ Advanced
☐ Expert

Beginner
Intermediate
Advanced
Expert
E 8 Team Building Activity

**Interprofessional Collaboration (IPC) Learning Activity**

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

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1. Competencies:
   - Role Clarification
   - Team Functioning
   - Interprofessional Team Conflict Resolution
   - Interprofessional Communication
   - Collaborative Leadership
   - Client-centred Care

2. Activity Summary

   In this activity, a group of students will come together and form groups of two and do a team building exercise to gain an understanding of some of the important skills and assets that good teams and their members have. The exercise will involve communication between two team members to complete a task. One team member will describe an object of their choice to the other team member in enough detail so they can draw it based on the instructions given.

3. Learning Objective:

   Purpose:
   1. Students will practice working as a team to complete a task.
   2. Students will begin to develop an idea of roles needed within a team and what skills contribute to effective team functioning and communication.
Expected outcome: Check all that apply.

☐ Describe  ☐ Explain  ☐ Demonstrate  ✓ Evaluate  ✓ Critique

1. Students will be able to evaluate and critique two helpful for strategies for improving team functioning
2. Students will be able to evaluate and critique two unhelpful strategies for team functioning

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

☐ Form a group of at least four students currently on placement at your site.

☐ Once you have formed a group of students, find a time that works in everyone’s schedule to meet.

☐ Depending on the number of students that are in your group divide into pairs of two to complete the small team-building task. Assign one member to be the individual drawing (drawer), and the other to be the communicator. After doing the activity once, switch roles and complete the task again.

☐ For the exercise, the communicator will first pick an object that they would like to describe to the drawer (the object can be anything, something in the room, or from memory). Once they have picked their object, they will draw it so they have something to reference when describing it to their partner.

☐ Once the communicator has drawn their item they will sit back to back with the drawer and begin describing the object to the drawer.

☐ After completing this once, switch roles so that now the drawer will draw an object and describe it to the initial communicator (as in step 4 and 5).

☐ Debrief the remaining steps with your partner and the entire group.

☐ Now that everyone in your group has participated in each role, reflect within your pair upon the activity and what you learned throughout and then come together as a larger group and discuss the following questions.

  o After being the communicator and drawer, what role did you find you were more successful with?

  o Did some individuals have better methods than others?

  o What do you think made certain individuals better at one role over the other, or compared to other team members?

☐ As a group, list three qualities that you found contributed to success throughout the activity.

  o You may find it difficult to narrow it down to just three qualities. Do your best and come to a conclusion within the group through discussion and compromise)
□ As a group, list three detrimental qualities that hindered/limited success to the exercise.
□ What makes these qualities so important to team functioning?
  ○ Are there any other key factors that you think contribute to an efficient healthcare provider team?
  ○ Why are establishing roles within teams so crucial?
□ Complete the reflection sheet.

5. **Site**: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

**Population**: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

**Practice Setting**: Check all that apply.

□ Community Agency □ Personal Care Home □ Private Home
□ Hospital □ Primary Care □ School
□ Other

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Student Professionals Involved: Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
- □ Nurse Practitioner
- □ Physical Therapy
- □ Practice Managers
- □ Social Work
- □ Speech Therapy
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- □ Physician Assistant
- □ Rehabilitation Assistant
- □ Respiratory Therapy
- □ Physician/Surgeon
- □ Psychologist
- □ Practice Managers
- □ Spiritual care
- □ Teachers
- □ Other ________________________________

Professionals Involved: Check all that apply.

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- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
- □ Nurse Practitioner
- □ Occupational Therapy
- □ Patient/Client
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- □ Psychologist
- □ Practice Managers
- □ Social Work
- □ Speech Therapy
- □ Spiritual care
- □ Teachers
- □ Other ________________________________

6. Stage of Education: Check all that apply.

- □ Beginner
- □ Advanced beginner
- □ Intermediate
- □ Advanced intermediate
- □ Expert

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E 9 Collaborative Leadership

Interprofessional Collaboration (IPE) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

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1. Competencies:

- Role Clarification
- Interprofessional Team Conflict Resolution
- Interprofessional Communication
- Team Functioning
- Collaborative Leadership
- Client-centred Care

2. Activity Summary

Students will use the video links and resources provided to explore what collaborative leadership is, what it means, and how it can be achieved. They will use the guiding questions provided to discuss the topic and as a group develop their own reasons as to why collaborative leadership is important when being part of an interprofessional team.

3. Learning Objective:

Purpose:

1. Students will use the links and information provided to start conversation about the importance of collaborative leadership in health care
2. Students will be given the tools to develop their knowledge and background in what collaborative leadership means.
Expected outcome: Check all that apply.

✓ Describe  ✓ Explain  ✓ Demonstrate  ✓ Evaluate  ✓ Critique

1. Students will be able to define collaborative leadership.
2. Students will be able to explain the importance of collaborative leadership in the health care setting.
3. Students will be able to demonstrate specific areas in healthcare where the use of collaborative leadership could be of benefit.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

☐ Assemble a student health care provider team, consisting of three or more students coming from different educational backgrounds. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.

☐ Once you have assembled a group, set a timeline to complete the background research and a day that you will come together as a group to discuss the information.
  - It may be best suited to set up your meetings over a lunch break. Perhaps one meeting to watch the two short videos together and read the article. And a second meeting where you discuss the things to think about section.

☐ Watch and read the following:
  - Webpage with two short videos discussing the collaborative change leadership program - [http://www.ipe.utoronto.ca/initiatives/interprofessional-education](http://www.ipe.utoronto.ca/initiatives/interprofessional-education)
  - Additionally, between your first and second meeting, create an opportunity to ask a preceptor about collaborative leadership and how they believe it is utilized within their department and work setting as a whole.

☐ Things to discuss:
  - What is top-down management? Why do you think is this not an appropriate form of management in the health care setting?
  - Change is hard to elicit, how do you think collaborative leadership can help promote effective change?
  - Why is collaborative leadership important in the health care system setting?
  - Name 3 factors that limit collaborative leadership in the health care system setting and an example for each of something that may help overcome these barriers.
- For example, implementing meetings between different discipline areas on how to improve seamless patient care or current programs at the site.
  - Remember collaborative leadership needs to be utilized within departments and between departments. It is important to see the link between each health care department and the purpose each one serves. Look at each one as part of a chain that requires effective leadership and communication in order to work efficiently.

- Depending on the amount of clinical experience you have had, explain a situation where you think collaborative leadership was displayed and an experience where it could have benefited the clinical situation and why?

- Having asked your preceptors about collaborative leadership, come together and discuss the information gained with your student group to see if different departments have a different outlook on or ways of utilizing collaborative leadership.
  - From what you discussed, are there different professions that have different strategies for implementing and using collaborative leadership?
    - If yes, what factors do you think may contribute to these differences?
    - Do you think collaborative leadership is utilized continuously and uniformly across the entirety of the health care system?
    - Is it important? Why?

- Individually, complete the reflection sheet.

5. **Site**: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: St. Boniface Hospital, Cardiology and Emergency departments.

**Population**: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.
Practice Setting: Check all that apply.

- □ Community Agency
- □ Personal Care Home
- □ Hospital
- □ Primary Care
- □ Private Home
- □ School
- □ Other ________________________________

Student Professionals Involved: Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
- □ Nurse Practitioner
- □ Occupational Therapy
- □ Physical Therapy
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- □ Rehabilitation Assistant
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Professionals Involved: Check all that apply.

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- □ Other ________________________________

6. Stage of Education: Check all that apply.

- □ Beginner
- □ Advanced beginner
- □ Intermediate
- □ Advanced intermediate
- □ Expert
Interprofessional Collaboration (IPC) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC education activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:
   - Role Clarification
   - Team Functioning
   - Interprofessional Team
   - Conflicts Resolution
   - Interprofessional Communication
   - Collaborative Leadership
   - Client-centred Care

2. Activity:

With this activity, you and two or more students from different professions will develop a presentation on homelessness to explore and identify barriers people in this population may experience and what each profession can do to provide equitable and appropriate services.

3. Learning Objective:

Purpose:

1. Students will work within a team to provide an experience of how professionals work together to develop a care plan that meets the client's/patient's and team's goal while being client-centred.
2. Students will explore when and how to implement team and client goals effectively.
3. Students will reflect on the team process and development to better understand how team dynamics affect client/patient care.
Expected outcome:

- [✓] Describe
- [✓] Explain
- [✓] Demonstrate
- [✓] Evaluate
- [✓] Critique

1. Students will be able to describe the potential relevance of homelessness to a health care provider’s practice
2. Students will be able to understand and describe two challenges that they encountered when working as a multidisciplinary team, and how those challenges were overcome

4. Steps to completing IPC activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- [ ] Assemble a group of students (two or more) currently at your site to complete the activity. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.
- [ ] Conduct individual research on the topic of homelessness in your community.
- [ ] Meet as a group and share research findings.
- [ ] Review the case study at the end of this activity. Brainstorm potential barriers for this patient to receive services.
- [ ] As a group, formulate a care plan for the patient, keeping in mind the different professions’ scope of practice and the different ways they may be involved in care.
- [ ] Determine short and long term SMART goals to improve the patient’s health; keeping the patient’s needs and wants in mind.
- [ ] Put together a short presentation that defines the topic, the case and potential barriers, care plan, and goals for the patient.
- [ ] Debrief with your group of students afterwards on the following:
  - Compare and contrast how each professional can contribute to the care plan.
  - Was there anything that proved to be difficult when trying to work collaboratively as a team, while also providing care that was within each professions scope and had the patient in the centre of all health care plans?
- [ ] Find an audience to show the presentation to, for example, your clinical educators, and get some feedback.
- [ ] Individually, complete the reflection sheet.
5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

**Practice Setting:** Check all that apply.

- Community Agency
- Personal Care Home
- Hospital
- Primary Care
- Private Home
- School
- Other ______________________________

**Student Professionals Involved:** Check all that apply.

- Audiology
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- Spiritual care
- Teachers
- Other ______________________________

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Professionals Involved: Check all that apply.

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- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
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- [ ] Spiritual care
- [ ] Teachers
- [ ] Other ________________________________

6. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
Case study:

Social History
Randy is a 53-year-old man who lives in Winnipeg, Manitoba. He has been chronically homeless for 12 years. He was previously married, and has two children who are aged 22 and 17. Randy and his wife divorced when he was 35, after he began experiencing severe symptoms of schizophrenia. He moved out of their home, and spent six years moving around friends’ homes and his own apartments before becoming completely homeless. Randy rarely sees his children, due in part to the fact that he does not have consistent access to a phone. Randy has not spoken to his ex-wife for 10 years. She has indicated to her children that she does not want to speak with him.

Prior to the onset of schizophrenia, Randy worked in a factory line at Maple Leaf.

Presently, Randy occasionally spends the night at Siloam Mission. However, it can be challenging for Randy to meet their criteria because they require their patrons to be sober.

Medical History
In addition to having schizophrenia, Randy also has uncontrolled type II diabetes, is a regular smoker (1 pack per day since his divorce), an alcoholic, and has recently developed chronic obstructive pulmonary disease.
I 11 Scope of Practice

**Interprofessional Collaboration (IPE) Learning Activity**

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1. **Competencies:**
   - ✓ Role Clarification
   - ✓ Team Functioning
   - □ Interprofessional Team
   - □ Interprofessional Conflict Resolution
   - ✓ Interprofessional Communication
   - □ Collaborative Leadership
   - ✓ Client-centred Care

2. **Activity Summary**

   Every profession has a scope of practice that provides guidelines on the responsibilities of each professional. It is important to know the scope of practice of your profession as well as other professionals’ scope to delegate tasks and work together as an interprofessional team. In this activity, three or more students will work together to learn about their own and their peers’ scope of practice.

3. **Learning Objective:**

   **Purpose:**
   
   1. Students will further examine the opportunities and limitations of their personal professions scope of practice.
   2. Students will learn about other professional’s scope of practice and where there may be overlap between professions.
**Expected outcome:** Check all that apply.

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<th>Explain</th>
<th>Demonstrate</th>
<th>Evaluate</th>
<th>Critique</th>
</tr>
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</table>

1. Students will be able to describe and explain their personal and other professionals’ scope of practice.
2. Students will be able to describe two unique aspects of their profession that do not overlap with other professions, and two aspects that do overlap with other professions.

**4. Steps to completing learning activity:** Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- Determine other students also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

- Individually, research your professional scope of practice.
  - Use policies from provincial and national sources. For example: the Canadian Physiotherapy Association, the Canadian Association for Occupational Therapists and the Canadian Society of Respiratory Therapists.
  - Consider what the scope of practice is in different provinces in Canada.
    - For example, for physiotherapy in Alberta the scope of practice includes ordering x-rays but in Manitoba it does not.
  - Consider what the repercussions are for working outside your scope of practice.

- Come together as a group and present your research. Create a Venn diagram as a graphic representation of the individual and collective abilities in scope of practice. Example:
Apply your newly learned information about scope of practice to a client case in your current clinical site. As a group discuss what each member of the professional team can provide for patient care.

- Consider where tasks can be delegated.
- Are there any tasks that can be shared among group members?

Debrief with students in your group and supervising healthcare provider or department head on the following:

- Reflect on the research of your scope of practice.
  - Did you learn something new?
- Compare how the scope of your profession differs from the other professionals.
  - What is your profession’s unique abilities? Limitations?
  - What is unique about the other professional’s abilities?
  - Are there any collective abilities?
- What is the significance of learning the unique and collective abilities of each profession’s scope of practice?
  - How might this information improve client-centred care?

Individually, complete the reflection sheet.

5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

Population: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*
Practice Setting: Check all that apply.

- Community Agency
- Hospital
- Other __________________________

Student Professionals Involved: Check all that apply.

- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Other __________________________

Professionals Involved: Check all that apply.

- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Nurse Practitioner
- Other __________________________

6. Stage of Education: Check all that apply.

- Beginner
- Advanced
- Intermediate
- Advanced
- Expert
- Other __________________________
12 Chronic Diseases

Interprofessional Collaboration (IPE) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

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1. Competencies:

- Role Clarification
- Team Functioning
- Interprofessional Team
- Conflict Resolution
- Interprofessional Communication
- Collaborative Leadership
- Client-centred Care

2. Activity Summary

Chronic diseases such as diabetes, cerebral palsy and multiple sclerosis require an interprofessional team to help manage the patient’s condition over a longer time-period. Patients with chronic conditions have different therapeutic needs than those with acute conditions. The needs of this population will be explored in a group of three or more students from different professions.

3. Learning Objective:

Purpose:

1. Students will gain a deeper understanding of the therapeutic needs of patients living with chronic conditions.
2. Students will learn how to work as an interprofessional team to prevent secondary complications and address symptoms associated with a chronic condition over a longer time-period.
Expected outcome: Check all that apply.

- [✓] Describe
- [✓] Explain
- [ ] Demonstrate
- [ ] Evaluate
- [ ] Critique

1. Students will be able to explain two unique needs of patients living with chronic conditions.
2. Students will be able describe the role of their profession in meeting the needs of the patient population.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- [ ] Determine other students also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

- [ ] As a group of students, choose a chronic condition to use for the discussion of this learning activity. For example: multiple sclerosis, diabetes, or muscular dystrophy.

- [ ] Individually, research on what your profession’s role is with the chosen condition.
  - You may choose to use clinical practice guidelines if available.
  - Focus on short term, long term and preventative needs.

- [ ] Find a patient at your site to hear about their experience with a chronic condition. This provides you with an opportunity to ask questions and hear how health professionals have worked to improve their wellbeing. You need to:
  - Contact a supervising healthcare provider or department lead to discuss the group interaction. They should be able to help you find a patient at your site with the condition you have chosen.
  - Develop a set of questions you wish to ask the patient. Have the questions cleared by the supervising healthcare provider or department lead.
  - Gain patient permission for the interaction.

- [ ] As a group of students, share your individual research to learn what role each profession plays in treating a patient with a chronic condition.
  - Compare your professional roles with the patient over the short term, long term and in the prevention of secondary co-morbidities.

- [ ] Interview a patient with your chosen chronic condition.

- [ ] Debrief with students in your group afterwards on the following:
  - Reflect on your experience interviewing a patient with your chosen chronic condition.
    - Compare their experience to your research.
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- Describe how the role of your profession differs from the other professionals.
  - Which profession has a superior or minor role in short term, long term and preventative care.
- Discuss the personal and professional implications when working with patients over a long term.
  - Individually, complete the reflection sheet.

5. **Site**: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

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**Population**: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

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**Practice Setting**: Check all that apply.
- Community Agency
- Personal Care Home
- Private Home
- School
- Hospital
- Primary Care
- Other

**Student Professionals Involved**: Check all that apply.
- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Nurse Practitioner
- Occupational Therapy
- Patient/Client
- Pharmacy
- Physical Therapy
- Physician/Surgeon
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- Social Work
- Speech Therapy
- Spiritual care
- Teachers
- Other

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Professionals Involved: Check all that apply.

- [ ] Audiology
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- [ ] Teachers
- [ ] Other

6. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
I 13 Driving

Interprofessional Collaboration (IPE) Learning Activity

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1. Competencies:
   - Role Clarification
   - Team Functioning
   - Interprofessional Team Conflict Resolution
   - Interprofessional Communication
   - Collaborative Leadership
   - Client-centred Care

2. Activity Summary

Following an acute medical event, such as a stroke, clients often wish to return to driving. Driving is a complex skill that requires many physical and cognitive abilities. In this activity, students will create a checklist that covers every area that should be assessed when considering fitness to drive. Where possible, using evidence, students will recommend an assessment to use for each area.

3. Learning Objective:

Purpose:

1. Students will analyze which skills, both physical and cognitive, are needed in order to drive safely.
2. Using evidence, students will compile a list of assessments that may be used to assess the skill areas identified.
**Expected outcome:** Check all that apply.

- [v] Describe
- [v] Explain
- [ ] Demonstrate
- [ ] Evaluate
- [ ] Critique

1. Students will be able to describe and explain the physical and cognitive skills required for driving, and explain which assessments can be used to assess those areas.
2. By working with students of different disciplines, students will be able to explain other professions’ possible roles within assessment of driving skills and returning to driving.

**4. Steps to completing learning activity:** Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- [ ] Connect with other students doing a fieldwork placement at your setting. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.
- [ ] As a group of students, meet to decide your timeline for this activity. You may choose to meet twice – first, to decide what to assess, and second, to decide assessments. Alternatively, you may plan to meet for an entire morning or afternoon to complete the whole activity. In preparation for this meeting, each group member should come up with a list of physical and cognitive abilities that they think are required to drive.
- [ ] Attend your meeting(s) and complete the activity as follows:
  - List physical and cognitive abilities that are required to drive.
  - List at least 5 assessments that may be used to assess the abilities in the above-described list.
- [ ] If staff at your site are interested, compile the information into a handout and distribute to staff.
- [ ] Complete the reflection sheet.

**5. Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: St. Boniface Hospital, Cardiology and Emergency departments.
**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

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</table>
6. **Stage of Education**: Check all that apply.

- □ Beginner
- □ Advanced
- □ Intermediate
- □ Advanced
- □ Expert
I 14 Health Promotion

Interprofessional Collaboration (IPE) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

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1. Competencies:

☐ Role Clarification  ☐ Interprofessional Team  ✓ Interprofessional Conflict Resolution  Communication
✓ Team Functioning  ☐ Collaborative Leadership  ✓ Client-centred Care

2. Activity Summary

Health promotion is a responsibility of every professional working in the health care field. To promote healthy lifestyles, professionals need to be equipped with the knowledge of healthy choices as well as possess the skills to empower and enable a patient to make healthy lifestyle changes. In addition, health promotion is better achieved through an interprofessional approach to create a supportive environment for the patient. This activity is designed for three or more students to develop skills to promote healthy living.

Learning Objective:

Purpose:

1. Students will work as a team to improve their knowledge base of healthy lifestyle choices and develop the skills to initiate conversations with patients and other professionals about lifestyle changes.
2. Students will learn to use the 5A’s; Ask, Assess, Advise, Agree, and Assist through roleplaying. The 5A’s are a template for beginning the conversation and providing directions for patients to be successful with their lifestyle changes.
3. The 5A technique will be applied to lifestyle changes including smoking cessation, obesity, and sedentary lifestyles with the goal of improving client-centered care.
Expected outcome:

✓ Describe    ✓ Explain    ✓ Demonstrate    ✓ Evaluate    ✓ Critique

1. Students will be able to describe one technique for initiating a conversation with a client about lifestyle changes.
2. Students will be able to explain the 5A technique.
3. Students will be able to explain two reasons why an interprofessional approach is useful in health promotion.

3. **Steps to completing learning activity:** Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

   □ Determine other students also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

   □ As a group of students, divide the following research topics:
      - 5A’s. *Suggested resource www.canadianobesitynetwork.ca/5As*
      - Healthy lifestyle recommendations for adults:
         - Exercise recommendations
            - Consider recommendations for cardiovascular fitness, and muscle/bone health.
         - Sedentary lifestyle recommendations
         - Smoking cessation
         - Alcohol consumption
         - Obesity
         - Other: Think up 1-2 more factors of a healthy lifestyle your group would like to learn about.

   □ As a group, present your individual research and create a poster together of the “healthy body”.
      - Discuss the use of the 5A’s in health promotion.
      - Discuss the guidelines for healthy living of the topics indicated above.

   □ Practice using the 5A’s by assigning one student as the professional, one as the patient and one as an evaluator to provide constructive feedback.
      - Switch roles so every student has a chance to take on each role once.
      - Try using the 5A’s for more than 1 scenario:
- Smoking cessation
- Obesity
- Sedentary Lifestyle

☐ Debrief with students in your group and supervising healthcare provider or department head on the following:

  o Did you find the 5A technique useful in promoting a healthy lifestyle?
  o Critique your individual performances using the 5A’s to promote a healthy lifestyle.

  □ Was there differences between professionals in their ability to communicate with patients?

  o How do you know when to talk about health promotion with your patient?
  □ When would this conversation be appropriate vs. inappropriate?

☐ Complete the reflection sheet.

4. **Site:** State the primary and secondary sites of the education activity. This is the location where your interprofessional team will gather and complete the activity. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

![Site](image)

**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

![Population](image)

**Practice Setting:** Check all that apply.

- Community Agency
- Personal Care Home
- Private Home
- Hospital
- School
- Primary Care
- Other

Guide to Interprofessional Activities in Practice Environments
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Student Professionals Involved: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Physical Therapy
- [ ] Practice Managers
- [ ] Social Work
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- [ ] Other ____________________________

Professionals Involved: Check all that apply.

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5. Stage of Education: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
I 15 Trauma Informed Care

Interprofessional Collaboration (IPE) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC learning activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:
   - Role Clarification
   - Team Functioning
   - Interprofessional Team Conflict Resolution
   - Collaborative Leadership
   - Interprofessional Communication
   - Client-centred Care

2. Activity Summary

   As health care practitioners, we are likely to come across people who have endured trauma. A toolkit has been released by Klinic (2013) in Winnipeg, which contains valuable information about trauma-informed care. In this activity, students from different professions will review the Manitoba Trauma-Informed Care Toolkit (http://trauma-informed.ca/wp-content/uploads/2013/10/Trauma-informed_Toolkit.pdf) and summarize information that is relevant to their setting into a lunch-and-learn presentation for the clinicians at their setting. This activity will facilitate the development of collaborative leadership and client-centred care skills.

3. Learning Objective:

   Purpose:

   1. Students will review the toolkit and together present relevant information with the hope that both students and clinicians will become more effective at treating people who have endured trauma.
   2. Students will develop interprofessional communication skills, and providing client-centred care as a team by examining trauma using a client-centred team approach.
Expected outcome: Check all that apply.

- Describe
- Explain
- Demonstrate
- Evaluate
- Critique

1. Students will be able to explain the concept of trauma-informed care and how it is used in healthcare.
2. Students will create a presentation about trauma-informed care for clinicians at their setting, and how it relates to different disciplines. The presentation will demonstrate the ability to collaboratively combine and present information that is relevant to a setting, and increase the settings’ ability to provide client-centred care.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- □ Connect with other students doing a fieldwork placement at your setting. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.

- □ Meet with the students participating in the project. At the meeting, cover the following:
  - Review the trauma-informed care toolkit (http://trauma-informed.ca/wp-content/uploads/2013/10/Trauma-informed_Toolkit.pdf) and decide how you would like to review it as a team.
    - For example, will everyone read the whole thing? Will you all read sections that are specific to your setting? Will you divide up the sections?
  - Set a date for your presentation and decide how you will advertise the presentation
  - Set the date for your next meeting, after you have reviewed the trauma-informed care toolkit

- □ At the next meeting, begin to work on your presentation. You may choose to create the presentation together or divide it up amongst the group. However, if you choose to divide it, you must meet before the presentation to ensure that the information is congruent and makes sense. The presentation should contain the following:
  - Definition of trauma-informed care
  - Why trauma-informed care is relevant
  - Techniques for being a trauma-informed clinician
  - One specific slide each with information about why it is relevant to your profession specifically

- □ Deliver your presentation.
☐ Debrief with your group and your educator.

☐ Complete the reflection sheet.

5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

   

**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

   

**Practice Setting:** Check all that apply.

- ☐ Community Agency
- ☐ Personal Care Home
- ☐ Private Home
- ☐ Hospital
- ☐ Primary Care
- ☐ School
- ☐ Other

**Student Professionals Involved:** Check all that apply.

- ☐ Audiology
- ☐ Dietitian
- ☐ Healthcare Aide
- ☐ Homecare
- ☐ Nurse
- ☐ Nurse Practitioner
- ☐ Occupational Therapy
- ☐ Patient/Client Pharmacy
- ☐ Physical Therapy
- ☐ Physician
- ☐ Physician Assistant
- ☐ Practice Managers
- ☐ Psychologist
- ☐ Rehabilitation Assistant
- ☐ Respiratory Therapy
- ☐ Social Work
- ☐ Speech Therapy
- ☐ Spiritual care
- ☐ Teachers
- ☐ Other
**Professionals Involved:** Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
- □ Nurse Practitioner
- □ Other ________________________________
  
- □ Occupational Therapy
- □ Patient/Client
- □ Pharmacy
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- □ Practice Managers
- □ Psychologist
- □ Rehabilitation Assistant
  
- □ Respiratory Therapy
- □ Social Work
- □ Speech Therapy
- □ Spiritual care
- □ Teachers

6. **Stage of Education:** Check all that apply.

- □ Beginner
- □ Advanced beginner
- □ Intermediate
- □ Advanced intermediate
- □ Expert
I 16 Social Isolation in Seniors

Interprofessional Collaboration (IPE) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC learning activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:

   - Role Clarification
   - Team Functioning
   - Interprofessional Team Conflict Resolution
   - Collaborative Leadership
   - Interprofessional Communication
   - Client-centred Care

2. Activity Summary

   In this activity, students will discuss the signs of social isolation in seniors and how it may affect practice. Seniors are at risk for social isolation, especially if their spouses and/or many of their friends have passed away, and if they no longer drive. A bank of resources to prevent social isolation in seniors for the setting will be created. Through discussion using a client-centred lens, students will develop the interprofessional communication competency.

3. Learning Objective:

   Purpose:

   1. Students will become more aware of the signs of social isolation and gain a deeper understanding of how it may affect practice
   2. Students will research available resources relevant to social isolation in Winnipeg
   3. Students will practice the competency of interprofessional communication by completing a project with students of different professions

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Expected outcome: Check all that apply.

✓ Describe  ✓ Explain  ✓ Demonstrate  ✓ Evaluate  ✓ Critique

1. Students will be able to describe social isolation and explain how it impacts the lives of seniors
2. Students will create a bank of resources that the site can use to help prevent social isolation.
3. Students will be able to describe how completing the activity helped to improve their interprofessional communication skills.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

☐ Connect with other students doing a fieldwork placement at your setting. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.

☐ Meet with your group of students. Prior to the meeting, research into social isolation in seniors so that you have an understanding of the overall phenomenon, risk factors, and impact of social isolation on health.

☐ At the meeting, review the case study “Helena P.” and discuss the following:
  - What factors in her life may be contributing to her social isolation.
  - How do you think her feelings of isolation may be impacting her health?
  - If you were her clinician, what would you recommend to her to combat her feelings of isolation?
  - Collectively, discuss what sort of interventions from each of your professions could be useful for combatting social isolation in seniors
  - Plan the next time to meet

☐ Individually, research resources in Winnipeg that may be useful for combatting social isolation. Keep in mind that actual activities are important, but it is also important to consider logistics, such as how they could be transported to and from activities.

☐ Meet with your group to compile resources. Sort them in a binder in a way that seems logical (for example, transportation resources, specific categories of activity resources, etc.). At the meeting, compile your information to create the following to place in the front of the binder:
  - A fact sheet explaining what social isolation in seniors is and why it’s significant
  - Risk factors for social isolation in seniors
  - Special considerations for treatment of those who are socially isolated

☐ Hand in your resource binder to the clinicians at your site.
Debrief the activity with your educator/supervising healthcare provider.

Complete the reflection sheet.

5. **Site**: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

   

**Population**: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

   

**Practice Setting**: Check all that apply.

- [ ] Community Agency
- [ ] Personal Care Home
- [ ] Private Home
- [ ] School
- [ ] Hospital
- [ ] Primary Care
- [ ] Other

**Student Professionals Involved**: Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Occupational Therapy
- [ ] Patient/Client
- [ ] Pharmacy
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- [ ] Spiritual care
- [ ] Teachers
- [ ] Other

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Professionals Involved: Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
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- □ Psychologist
- □ Rehabilitation Assistant
- □ Respiratory Therapy
- □ Social Work
- □ Speech Therapy
- □ Spiritual care
- □ Teachers
- □ Other ________________________________

6. Stage of Education: Check all that apply.

- □ Beginner
- □ Advanced beginner
- □ Intermediate
- □ Advanced intermediate
- □ Expert
Geriatric Rehabilitation Referral

Name: Helena P.
Age: 83
Diagnosis: R shoulder subluxation

Social

Helena, a retired teacher, lives alone in a two-storey home. Her husband, Don, passed away seven years ago. Don and Helena have three daughters, and seven grandchildren. Helena’s daughter, Jackie, and her husband, Brian, live nearby in Winnipeg with their two children who are 17 and 22. Helena’s two other daughters, Cindy and Lisa, live out of province. Since Don’s passing, Jackie and Brian and their children have been primary caregivers for Helena. They do her lawn care and snow removal, bring her meals 2-3 times per week and do her laundry.

Prior to Don’s passing, they enjoyed travelling; but since his passing, Helena just drives herself to Jackie and Brian’s cottage two hours away on Lake Winnipeg. Within the city, she drives herself to a once-weekly water aerobics class, and to the convenience store to pick up small groceries, although Jackie and Brian do the bulk of her shopping. Helena has very little social contact since her two best female friends passed away recently and reports feeling isolated.

Medical Status

Helena fell and subluxed her shoulder after tripping on a throw carpet. This was her first fall that she had been hospitalized for, but Jackie reports that she suspects her mom has fallen in the past based on bruises that Jackie has noticed, although Helena denies this. Prior to her hospitalization, Helena had been in relatively good health. Although no surgery was necessary, the current hospitalization has lasted three weeks long thus far and has resulted in a considerable amount of deconditioning. She is currently not able to ascend or descend stairs.

Physical Environment

Helena lives in a 2-storey home with a three-step entry into the front door. Her bedroom is on the second floor, and her laundry is in the basement. Her stairs all have a railing on one side of the staircase. The house is carpeted throughout, with throw rugs in every room. Helena has never had her home assessed and does not have any grab bars or any other adaptive equipment installed.

Discharge Planning

Helena is in geriatric rehabilitation and the team is hoping to discharge her in a week. Helena is adamant that she will return home, and does not want home care because “she is fine on her own; and if she isn’t, Jackie will help”. The following concerns have been raised about her discharge:

- Safety in the kitchen. During a kitchen assessment, Helena failed to turn off the oven after making soup.
- **Transfers.** Although she is able to transfer independently, she requires standby assist because she still looks “wobbly” at times and often forgets to reach for grab bars.

- **Driving.** Helena still has a drivers’ license but hospital staff are concerned about her ability to drive due to decreased ability to transfer in and out of the car, decreased shoulder mobility and possibly impaired cognitive abilities.

Helena’s daughters have been actively involved in her rehab process. Here are their concerns:

**Jackie:** Jackie does not want her mother to be discharged home. Jackie hopes that Helena can be discharged to an assisted living facility. Jackie reports that her and Brian are feeling overwhelmed by the amount of care that her mother requires, and she states that she is constantly worrying about her mother because she doesn’t think the house is safe. Jackie and Brian’s 17-year old son currently spends a lot of time with Helena, but is moving to Toronto for university in September and Jackie fears that if Helena is not in a more suitable environment by then, they will have to force her to move, which Jackie is hoping to avoid. Jackie and Brian have discussed home care or assisted living with Helena in the past but Helena refuses to consider either.

**Cindy:** Cindy firmly believes that her mother should be allowed to do “whatever makes her happy”, including driving and choosing where to live, and tends to take Helena’s side in most arguments. Her and Jackie have argued in the past about what is the best option for Helena.

**Lisa:** Lisa stated that she would be happy to do whatever the health professionals advise, but agrees that at least home care would be necessary. She tends to mediate arguments between Cindy and Jackie.
I 17 Giving and Receiving Feedback

Interprofessional Collaboration (IPE) Learning Activity

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1. Competencies:
   □ Role Clarification    ✓ Interprofessional Team
   □ Team Functioning     ✓ Conflict Resolution    ✓ Interprofessional
   □ Collaborative Leadership    ✓ Communication
   ✓ Client-centred Care

2. Activity Summary

Giving and receiving feedback is a vital part of learning. For students, feedback is utilized to help develop skills, make adjustments and improve overall practice. In this activity, three or more students will work together to learn how to give and receive feedback to prevent conflict, and utilize feedback in a constructive way.

3. Learning Objective:

Purpose:

1. Students will learn how to give constructive feedback to one-another as well as take feedback and apply it to improve client-centered care.
2. Students will improve their interprofessional communication and interprofessional team conflict resolution skills by practicing giving one another feedback.
**Expected outcome:** Check all that apply.

- [ ] Describe
- [ ] Explain
- [ ] Demonstrate
- [ ] Evaluate
- [ ] Critique

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<table>
<thead>
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<tr>
<td>1. Students will complete a role-play activity, which will allow them the opportunity to practice giving and receiving feedback.</td>
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<td>2. Students will be able to explain and critique two different methods for giving feedback.</td>
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<tr>
<td>3. Students will be able to explain how their team conflict resolution and interprofessional skills improved because of completing this activity.</td>
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</tr>
</tbody>
</table>

4. **Steps to completing learning activity:** Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- [ ] Determine which students are also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

- [ ] As a group of students, divide the following research topics:
  - CORBS: Clear, Owned, Regular, Balanced, Specific
    - Also known as “Sandwich model”
  - DESC: Describe, Express, Specify, Communicate.
  - Debriefing with Good Judgement
    - Useful resources:

- [ ] Come together as a group to present your individual research.
  - Compare and contrast the different types of feedback: Judgmental vs. non-judgmental
  - In what setting would each type of feedback be most appropriately utilized?
  - Take some time to self-reflect on your current experience giving and receiving feedback.

- [ ] Practice using the tools by assigning one student as the professional, one as the patient and one as an evaluator to provide constructive feedback.
Switch roles so every student has a chance to take on each role once.

Debrief with students in your group and supervising healthcare provider or department head on the following ideas:

- Did you find the techniques useful?
- Critique your individual performances using the techniques to give feedback.
  - Reflect on how it felt to give vs. receive feedback.

Complete the reflection sheet.

5. **Site**: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

Population: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

Practice Setting: Check all that apply.

- Community Agency
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- School
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- Other

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**Professionals Involved:** Check all that apply.

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- [ ] Rehabilitation Assistant
- [ ] Respiratory Therapy
- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers
- [ ] Other

6. **Stage of Education:** Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
I 18 Conflict Resolution

Interprofessional Collaboration (IPE) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

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1. Competencies:

- Role Clarification
- Team Functioning
- Interprofessional Team Conflict Resolution
- Collaborative Leadership
- Interprofessional Communication
- Client-centred Care

2. Activity Summary

Students (three or more) will come together and watch videos depicting conflict to gain an understanding of how to better manage and resolve conflict as it arises in team situations.

3. Learning Objective:

Purpose:

1. Students will watch videos as a tool to visualize realistic clinical situations where conflict may arise.
2. Students will collaboratively think critically about how different conflict scenarios situations can be managed effectively, developing the interprofessional team conflict resolution competency.
Expected outcome: Check all that apply.

✓ Describe ✓ Explain □ Demonstrate □ Evaluate ✓ Critique

1. Students will be able to name and describe two different ways to handle conflict.
2. Students will be able to name and describe two ways in which their approach to handling conflict in the workplace changed or remained the same, based on the conversations with students from different professions.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

□ Find other students (three or more) from a different profession that are currently on placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

□ Once you have assembled a group, find two times that work to meet for an hour or so at a time. Use your own discretion as to how you should break up the activity to complete in two meetings. (Step 5 is a recommended spot**)

□ During your first meeting, watch the following video links that outline conflict as it may arise in health care. Use these videos to spark conversation and remind you of situations where you experienced conflict (either in your personal life or in the health care setting)

  o https://www.youtube.com/watch?v=sdJvTllts6k
  o Conflict Management: Between doctor and nurse, abuse to patient
    ▪ 1. https://www.youtube.com/watch?v=6nQmyvDiXkE
    ▪ 2. https://www.youtube.com/watch?v=DmJYE3vxA
    ▪ 3. https://www.youtube.com/watch?v=QkzQ5MSRhm4

□ After watching the previous videos showing different forms of conflict discuss the situations as a group.

  o Give six examples of what went wrong in the scenarios
  o Give six examples of how the situation could have gone better. What could have been done?
  o Remember there may be more than one way to approach these situations, be respectful of everyone’s opinion. You may learn new ways to handle situations.
  o What are some negative long-term effects of conflict in the workplace that can arise and be experienced by individual employees?
  o What are some negative long-term effects of recurrent conflict that may be reflected back on the workplace?
Remember conflict does not have to be a huge ordeal, and can present itself in ways that are most often overlooked and not considered to be conflict. By definition, conflict arises when one person has a need of another and that need is not being met.

- Do you think all conflict is negative?
  - What are some key characteristics needed in order to find resolution of conflict? (Give three and explain why they are important)
  - Using the scenarios from the videos, or conflict you have experienced in your own life (work or personal), answer and discuss the following as a group for three different instances where conflict was experienced (If you can use your own experiences, describe the situation first to your group and then discuss questions as a group):
    - What is causing the conflict?
    - What needs are not being met for the individuals involved?
    - Can these needs be met? How?
    - In the particular situation, is there more than one way the conflict can be managed?
      - If yes, are there benefits of addressing the conflict either one way or the other?
  - Can you think of any positives that can come from addressing conflict and its management especially in a team setting? (Determine at least one positive)

- Do you believe conflict is properly managed currently in healthcare on a regular basis? What is most often done when it arises in your own opinion?
  - What do you think you can do to ensure that it is handled appropriately, as you become a working professional in the healthcare system? Individually come up with one thing you will do, and then discuss each as a group and why.

- What is your key take away from this activity? Share with the group.
  - Remember conflict does not have to be a huge ordeal, and can present itself in ways that are most often overlooked and not considered to be conflict. By definition - Conflict arises when one person has a need of another and that need is not being met.
  - Complete the reflection sheet.
5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

**Practice Setting:** Check all that apply.

- Community Agency
- Hospital
- Other

- Personal Care Home
- Primary Care

- Private Home
- School

**Student Professionals Involved:** Check all that apply.

- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Nurse Practitioner
- Occupational Therapy
- Patient/Client
- Pharmacy
- Physical Therapy
- Physician
- Physician Assistant
- Physician/Surgeon
- Practice Managers
- Physical Therapy
- Psychologist
- Rehabilitation Assistant
- Respiratory Therapy
- Social Work
- Speech Therapy
- Spiritual care
- Teachers
- Other
**Professionals Involved:** Check all that apply.

- [ ] Audiology
- [ ] Dietitian
- [ ] Healthcare Aide
- [ ] Homecare
- [ ] Nurse
- [ ] Nurse Practitioner
- [ ] Occupational Therapy
- [ ] Patient/Client
- [ ] Pharmacy
- [ ] Physical Therapy
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- [ ] Physician Assistant
- [ ] Practice Managers
- [ ] Psychologist
- [ ] Rehabilitation Assistant
- [ ] Respiratory Therapy
- [ ] Social Work
- [ ] Speech Therapy
- [ ] Spiritual care
- [ ] Teachers
- [ ] Other

**6. Stage of Education:** Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
Interprofessional Collaboration (IPE) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC learning activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:

- Role Clarification
- Interprofessional Team Conflict Resolution
- Interprofessional Communication
- Team Functioning
- Collaborative Leadership
- Client-centred Care

2. Activity Summary

Therapeutic groups for patients are common amongst many different health settings. Groups are often co-facilitated by different professions in order to maximize information that can be shared, and many different topics could be covered in a group. In this activity, two students from different professions will design and run a 4-week therapeutic group for patients that is relevant to their setting. Students will have the opportunity to develop the team functioning, collaborative leadership and client-centred care interprofessional education competencies.

3. Learning Objective:

Purpose:

1. Students will have the opportunity to identify a need for, design, and co-facilitate a 4-week therapeutic group.
2. Students will develop the team functioning competency through collaboration on group design and facilitation with another student.
3. Students will develop the collaborative leadership competency by co-leading a therapeutic group.
4. Students will develop the client-centred care competency by gathering input from clients to aid in designing the group.
**Expected outcome:** Check all that apply.

- ✔ Describe
- ✔ Explain
- ✔ Demonstrate
- ✔ Evaluate
- ✔ Critique

| 1. By the end of this activity, students will have demonstrated the ability to identify a specific need for a group within a setting, design the group, carry it out, and then evaluate the outcome of the group. |
| 2. Students will be able to describe one way in which they believed they developed in the competency areas of collaborative leadership, team functioning, and client-centred care through the experience of working closely with a student from a different profession. |

**4. Steps to completing learning activity:** Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- ☐ Connect with other students doing a fieldwork placement at your setting. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.

- ☐ Once you have found your group, meet with clinicians of different professions, formally or informally (talking over lunch is appropriate as well). Ask them if there are any groups that they think their patients would benefit from participating in (for example, art group, exercise group, stretching group, cooking groups, etc.).

- ☐ If appropriate, speak casually with patients at the setting to see if there are any groups that they would be interested in participating in.

- ☐ As you hear suggestions from clinicians and patients, research their ideas to see if there has been any evidence for the effectiveness in that sort of group within your setting.

- ☐ Once you have gathered information from clinicians, patients and your own research, meet with your group of students. Discuss the following at your meeting:
  - Review the information that you collected and decide which group you want to run.
  - Create a group protocol. Information to include in the protocol includes the purpose of the group, the learning objectives of the group, equipment required, and an overview of what will be covered in each session.
  - Establish the dates for the groups (ideally, approximately four)
  - Plan to decide how you will advertise the dates to patients (for example, will you tell them verbally? Will you put posters up around your setting? Will you send out emails?)
  - Decide to either design all the sessions together or divide them up
  - Create a survey that you will give out before the first and after the last group in order to evaluate its effectiveness.
Prior to running the first group and once you have completed your group protocol and designed your sessions, meet with your educators to ensure that they are in agreement with what you are planning on doing.

Run the groups.

After the final group, meet with your partner to review the pre- and post-surveys. Create a page-long report to provide to your educators about the effectiveness of the group.

Complete the reflection sheet.

5. Site: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: St. Boniface Hospital, Cardiology and Emergency departments.

Population: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.

Practice Setting: Check all that apply.

- Community Agency
- Personal Care Home
- Private Home
- Hospital
- Primary Care
- School
- Other

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Student Professionals Involved: Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
- □ Nurse Practitioner
- □ Physical Therapy
- □ Practice Managers
- □ Social Work
- □ Speech Therapy
- □ Occupational Therapy
- □ Patient/Client
- □ Pharmacy
- □ Physician
- □ Physician Assistant
- □ Rehabilitation Assistant
- □ Respiratory Therapy
- □ Other ________________________________

Professionals Involved: Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
- □ Nurse Practitioner
- □ Occupational Therapy
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- □ Practice Managers
- □ Rehabilitation Assistant
- □ Respiratory Therapy
- □ Social Work
- □ Speech Therapy
- □ Spiritual care
- □ Teachers
- □ Other ________________________________

6. Stage of Education: Check all that apply.

- □ Beginner
- □ Advanced beginner
- □ Intermediate
- □ Advanced intermediate
- □ Expert
P 20 Suffering

Interprofessional Collaboration (IPC) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC education activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each education activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:

✓ Role Clarification □ Interprofessional Team
✓ Interprofessional Communication
✓ Team Functioning □ Conflict Resolution
✓ Collaborative Leadership □ Client-centred Care

2. Activity:

Suffering is a multifaceted experience that affects people living with a variety of conditions, such as fibromyalgia, quadriplegia, and heart failure. With this activity, you and two or more other students of different professional backgrounds will explore the patients’ experience of suffering and develop a therapeutic plan to address this dimension of patient care.

3. Learning Objective:

Purpose:

1. Students will improve their knowledge of patient suffering.
2. Students will explore how their scope of practice can help with this dimension of the patient experience and compare their professional roles when determining a plan of care.
Expected outcome: Check all that apply.

✓ Describe ✓ Explain □ Demonstrate □ Evaluate □ Critique

1. Students will increase their role clarification, client-centered care and team functioning by describing and explaining the role of their profession to address the patient experience of suffering.

2. Students will be able to compare their role to other health care professionals when treating patients who are suffering.

3. Students will be able to critique their plan of care to determine its effectiveness at reducing suffering.

4. Steps to completing IPC activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

☐ Determine which students are also currently doing a placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

☐ As a group of students, select a patient population or condition that would experience suffering that your group seeks to learn about. Examples include fibromyalgia, amputations, heart failure, quadriplegia, etc.

☐ (Optional) Decide if your group chooses to find and meet with a patient at your site to hear about their experience with suffering. This provides you with an opportunity to ask questions and hear how health professionals have worked to improve their wellbeing. If chosen, you need to:

☐ Contact a supervising healthcare provider or department lead to discuss the group interaction. They should be able to help you find a patient at your site with the condition you have chosen.

☐ Develop a set of questions you wish to ask the patient. Have the questions cleared by the supervising healthcare provider or department lead.

☐ Gain patient permission for the interaction.

☐ Conduct individual research on the topic of suffering.

  • Focus on your scope of practice to learn what tools you have that can help improve the patient’s experience of suffering.

  • Use Youtube videos to research your selected population. Youtube videos can allow you to peak into their lives by viewing real patient testimonies.

☐ Come together as a group and share your individual research. Discuss what each of you can implement in plan of care.

  • Compare your roles in the plan of care. You may find that some professions have a larger role than your own.
• Develop a hypothetical plan of care for your patient population or condition that addresses their experience with suffering. You may choose that the profession with a larger role be the leader in this discussion.

□ (Optional) Meet with a patient from your selected population at your site to hear their testimony.

□ Debrief with students in your group and supervising healthcare provider or department head on the following:

• Based on what you learned from this activity, how can each professional address the experience of suffering?

• Describe how each professional’s role compares to the others. Did one profession have a larger role than the other? Was there any overlap in scope of practice?

• Discuss individual feelings and emotions during the patient interview. How did the interview help deepen your knowledge base? Was there anything that was surprising to learn?

• Consult with your supervising healthcare provider or department head to compare your theoretical plan of care to an actual plan of care that is implemented at your site. Were there any differences?

□ Individually, complete the reflection sheet.

5. Site: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: St. Boniface Hospital, Cardiology and Emergency departments.

Population: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.

Practice Setting: Check all that apply.

□ Community Agency
□ Personal Care Home
□ Private Home
□ Hospital
□ Primary Care
□ School
□ Other
Student Professionals Involved: Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
- □ Nurse Practitioner
- □ Physical Therapy
- □ Practice Managers
- □ Social Work
- □ Speech Therapy
- □ Other

Professionals Involved: Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse
- □ Nurse Practitioner
- □ Occupational Therapy
- □ Patient/Client
- □ Pharmacy
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- □ Psychologist
- □ Rehabilitation Assistant
- □ Respiratory Therapy
- □ Spiritual care
- □ Teachers
- □ Social Work
- □ Speech Therapy
- □ Other

6. Stage of Education: Check all that apply.

- □ Beginner
- □ Advanced beginner
- □ Intermediate
- □ Advanced intermediate
- □ Expert
- □ Expert
P 21 Health Promotion

Interprofessional Collaboration (IPC) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC learning activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:

✓ Role Clarification
✓ Team Functioning

□ Interprofessional Team Conflict Resolution
✓ Interprofessional Communication
✓ Collaborative Leadership

□ Client-centred Care

2. Activity Summary

In this activity, a group of three or more students from different health professions will come together, pick an area of interest, develop, and then present a prevention/promotion strategy/initiative that is upstream in health care delivery to improve the health outlook in this area.

3. Learning Objective:

Purpose:

1. Students will critically think about an area of health care and how an initiative can be developed to address issues within this area.
2. Through completion of the project, students will develop their competencies in the areas of team functioning, role clarification, leadership and communication in an interprofessional team setting.
Expected outcome: Check all that apply.

✔ Describe ✔ Explain ✔ Demonstrate □ Evaluate □ Critique

1. Students will have designed and delivered a presentation with a focus on health promotion
2. Students will be able to name and describe one way in which working on this project improved their competencies in the areas of team functioning, role clarification, leadership and interprofessional communication

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

□ Find other students (three or more) from a different profession that are currently on placement at your site. Consider asking the clinical services lead of your department, or asking your own educator/supervisor if they know of any other students.

□ Once you have created a group, pick an issue in health care. Be specific when selecting the patient population and demographic.
  - Possible topics include: physical literacy, smoking prevention/cessation, drug dependence intervention, mental health, asthma education, diabetes control/management, pain management
  - Example: Poor oral health status of children from lower socioeconomic and diverse populations. (Hallas, Fernandez, Herman, and Moursi, 2015)

□ Determine a promotion/prevention strategy upstream that would improve this issue. (ie: How are you going to deliver your service/strategy?) Using the literature, collectively decide which methods may be most effective for implementing your strategy.

□ What is the main outcome/goal you wish to achieve with your initiative?
  - Example: decrease rates of children that begin smoking in their teens, prevention of dental caries in children

□ What are the focus areas of your intervention and patient population?
  - Example: education on risks and hazards of smoking, addiction counseling, overall health impacts

□ What healthcare professionals needs to be involved in the delivery of your strategy?

□ Once your strategy has been developed, discuss the following areas as they pertain to the success of your initiative:
  - Role Clarification
    - Why did you include each profession in your strategy?
    - What will their roles be in the delivery of your initiative?
○ Team Functioning
  ▪ Discuss the scope of each individual, is there any overlap between professions.
    ● If yes how will you determine who does what tasks?
  ▪ Do you perceive scope overlap as an asset to the overall team functioning of the team of healthcare professionals you have assembled?
  ▪ How is each profession involved going to help achieve your main goal?

○ Team Dynamics
  ▪ What will you need to have an effective team? Here are some questions that will help evaluate the delivery of your initiative.
    ● What resources will you need?
    ● What will be the structure of your team? How will leadership be established?
    ● What team roles will you need to run effectively? Choose at least one from each category and give an explanation as to why you chose them.
      ○ Belbin (2010) outlined 9 roles that team members often assume when part of a team. They are as follows:

Roles on Interprofessional Teams:

<table>
<thead>
<tr>
<th>Thought Oriented Roles</th>
<th>Contribution to the team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Plant</td>
<td>Creative/imaginative, solves difficult problems</td>
</tr>
<tr>
<td>Monitor/Evaluator</td>
<td>Strategic, sees all positions, good judgment</td>
</tr>
<tr>
<td>Specialist</td>
<td>Single-minded, self-starter, dedicated</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Action Oriented Roles</th>
<th>Contribution to the team</th>
</tr>
</thead>
<tbody>
<tr>
<td>Shaper</td>
<td>Drive and courage to overcome obstacles, works well under pressure, interpersonal communication skills</td>
</tr>
<tr>
<td>Implementer</td>
<td>Disciplined, reliable, conservative and efficient, turns ideas into action</td>
</tr>
<tr>
<td>Completer/Finisher</td>
<td>Finds errors and omissions, very thorough and conscientious</td>
</tr>
<tr>
<td>People Oriented Roles</td>
<td>Contribution to the team</td>
</tr>
<tr>
<td>--------------------------</td>
<td>-------------------------------------------------</td>
</tr>
<tr>
<td>Team worker</td>
<td>Cooperative, good listener, perceptive, accommodating</td>
</tr>
<tr>
<td>Resource investigator</td>
<td>Enthusiastic, extroverted, explorative</td>
</tr>
<tr>
<td>Coordinator</td>
<td>Mature, confident, clarifies goals and promotes decision making, good delegator</td>
</tr>
</tbody>
</table>

(Wiess, Tilin, & Morgan, 2014)

- What is the desired size of your team in order to run effectively?
- Will team members be able to work independently? Will they also have the freedom to use different skills and talents?
- Will members feel valued as part of the team?

☐ Use the template provided at the end of this activity to outline the key information for the development of your initiative. Create a short presentation to deliver to health professionals at your setting about the initiative you have decided to develop (the who, what, when, where, why of the questions you have answered above).

☐ Complete the reflection sheet.

5. **Site**: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: *St. Boniface Hospital, Cardiology and Emergency departments.*

**Population**: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*
Practice Setting: Check all that apply.
- Community Agency
- Hospital
- Other __________________________

Student Professionals Involved: Check all that apply.
- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Nurse Practitioner
- Occupational Therapy
- Patient/Client
- Pharmacy
- Physical Therapy
- Physician
- Physician Assistant
- Practice Managers
- Psychologist
- Rehabilitation Assistant
- Respiratory Therapy
- Social Work
- Speech Therapy
- Spiritual care
- Teachers
- Other __________________________

Professionals Involved: Check all that apply.
- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Nurse Practitioner
- Occupational Therapy
- Patient/Client
- Pharmacy
- Physical Therapy
- Physician
- Physician Assistant
- Practice Managers
- Psychologist
- Rehabilitation Assistant
- Respiratory Therapy
- Social Work
- Speech Therapy
- Spiritual care
- Teachers
- Other __________________________

6. Stage of Education: Check all that apply.
- Beginner
- Advanced beginner
- Intermediate
- Advanced intermediate
- Expert
References:


https://www.slideshare.net/darina30/organizational-behavior-13th-edition

<table>
<thead>
<tr>
<th>Health Initiative/Strategy (name):</th>
<th>Patient population (demographics):</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
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<tr>
<td><strong>Main goal of strategy:</strong></td>
<td><strong>Professionals involved:</strong></td>
</tr>
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<td>5.</td>
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<tr>
<td>Focus areas to achieve main goal: (i.e., what steps are needed to achieve goal)</td>
<td>Notes:</td>
</tr>
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<td>1.</td>
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<tr>
<td>4.</td>
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</tbody>
</table>
P 22 Transgender Patients

Interprofessional Collaboration (IPE) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPE learning activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:

✓ Role Clarification  ✓ Interprofessional Team  ✓ Interprofessional
✓ Team Functioning  ✓ Conflict Resolution  Communication
✓  ✓ Collaborative Leadership  ✓ Client-centred Care

2. Activity Summary

Transgender people have historically been discriminated against in the health care system (Lindroth, 2016). It has been reported that in order for treatment to improve, health care professionals must be more aware of issues facing transgender people and modify the way service is delivered (Selix & Rowniak, 2016). In this activity, a group of two or more students will create a presentation to present to the clinical team at their setting detailing the issues facing transgender people in the healthcare system, and ways that service provision could be improved.
3. Learning Objective:

Purpose:

1. In this activity, students will create a presentation which details the challenges faced by transgender people accessing the health care system, an analysis of any work previously done at their site addressing this (if any), and evidence-based recommendations for the site to improve health care provision for transgender people.
2. While completing this project, students will have the opportunity to develop skills in the areas of role clarification, by considering different possible roles for each profession; collaborative leadership, by collectively leading a project; interprofessional communication, through group discussions; and client-centred care, by applying a client-centred lens to the research and presentation.

Expected outcome: Check all that apply.

✓ Describe ✓ Explain ✓ Demonstrate ✓ Evaluate ✓ Critique

1. Students will be able to describe and explain issues facing transgender people accessing health care.
2. Students will be able to evaluate and critique any work done on the subject previously at the setting.
3. Students will demonstrate the ability to create evidence-based recommendations for improving health care provision.
4. Students will be able to name and describe how completing this project improved their skills in the areas of role clarification, collaborative leadership, interprofessional communication and client-centred care.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

□ Connect with other students doing a fieldwork placement at your setting. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions

□ Once you have established your group, meet to discuss the following:
  o Establish a date for the final presentation, determine how you will book a room for the presentation and how you will invite staff to the presentation

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After setting the date for the presentation, create a timeline for when you will have each step of the project complete:

- Initial research
- Compiling presentation
- Practicing presentation
- Other steps you feel are necessary

Decide how you will divide the research

Plan the next meeting

Continue to meet as regularly as possible to ensure that the group is progressing as expected.

Complete the final presentation. It should cover the following areas:

- A summary of research on the health status of transgender people in Canada compared to the rest of the population, and research on transgender people using the healthcare system (for example, possible barriers faced by transgender people accessing the healthcare system).
- A review of any previous work done (for example, specific policies or education sessions) on addressing transgender healthcare needs at your setting.
- Three detailed and thorough evidence-based recommendations for improving the quality of healthcare service delivery for transgender people that are specific to your setting.

Once the final presentation is complete, meet to summarize findings into one page report to give to the clinical leader and/or anyone else who requested a copy.

Complete the reflection sheet.

5. Site: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: St. Boniface Hospital, Cardiology and Emergency departments.
**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*

**Practice Setting:** Check all that apply.

- □ Community Agency
- □ Personal Care Home
- □ Private Home
- □ Hospital
- □ Primary Care
- □ Other ________________________

**Student Professionals Involved:** Check all that apply.

- □ Audiology
- □ Dietitian
- □ Healthcare Aide
- □ Homecare
- □ Nurse Practitioner
- □ Occupational Therapy
- □ Patient/Client
- □ Pharmacy
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- □ Social Work
- □ Speech Therapy
- □ Spiritual care
- □ Teachers
- □ Other ________________________

**Professionals Involved:** Check all that apply.

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- □ Dietitian
- □ Healthcare Aide
- □ Homecare
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- □ Nurse Practitioner
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- □ Psychologist
- □ Rehabilitation Assistant
- □ Respiratory Therapy
- □ Social Work
- □ Speech Therapy
- □ Spiritual care
- □ Teachers
- □ Other ________________________
6. **Stage of Education**: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
References:


P 23 Rounds Presentation

Interprofessional Collaboration (IPC) Learning Activity

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1. Competencies:
   - Role Clarification
   - Team Functioning
   - Interprofessional Team Conflict Resolution
   - Interprofessional Communication
   - Collaborative Leadership
   - Client-centred Care

2. Activity Summary

   In this activity, two or more students will participate and present patient(s) during rounds. They will take sole responsibility for being an active participant and answering questions pertaining to their area of expertise for their patient(s) on rounds. As clinicians, being involved during rounds is an important aspect of daily duties while working in critical care areas. This is where the care plan is developed with the entire team and changes based on patient condition are made. After participation, students will come together and debrief on their experiences.

3. Learning Objective:

   Purpose:
   1. Students will have the opportunity to practice demonstrating effective and appropriate communication as it pertains to the patient case(s).
   2. Students will then use this interaction to gain insight and feedback in a safe environment of proper interprofessional leadership, communication, conflict resolution, team functioning, and client-centered care in a specific setting.
Expected outcome: Check all that apply.

- Describe
- Explain
- Demonstrate
- Evaluate
- Critique

1. Students will gain an understanding about what it means to be a team member by sharing their clinical knowledge when it comes to the clinical course of a patient depending on their condition.
2. Students will be able to name and describe how participating in this activity developed their skills in the areas of communication and leadership skills.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

- Find other students from a different profession (at least one, but the more students you find, the greater insight you can gain) on placement that also have the opportunity to participate in daily patient rounds. If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions.

- Once you have found another student(s), find a time that works to meet and develop a timeline to complete the activity. Determine your schedules and when you would all be able to participate on rounds with your supervising healthcare provider/educator present.

- Individually, prepare for and participate in rounds with your educator.

- Individually, after you have participated in rounds, debrief with your educator and get their feedback on your performance.
  - What were some things that you did well? First reflect on your own performance, then, get feedback from your educator.
  - What were some things that you could improve on? First reflect on your own performance, then, get feedback from your educator.
  - Here are some things to consider when thinking about your performance:
    - Were you actively listening to every profession’s report, or were you more concerned with your own?
    - Were you mindful of the impact of your role and actions on other members of the team?
    - Did you participate in the decision-making process where appropriate?
    - If applicable, were you incorporating/encouraging the patient’s thoughts and concerns?
  - Use this opportunity to ask your educator any questions/concerns you may have had during the activity.
Meet as a group with all the students involved. You may wish to have a supervising healthcare provider present at this meeting as well to answer any questions that arise.

During your meeting, debrief the following ideas/questions:

- Take 10-15 minutes to talk about and listen to each of your experiences.
- Was there anything that you found surprising/different than what you expected?
- Consider the following aspects of team functioning and evaluate your experiences as a group:
  - Do you think effective working relationships were displayed?
  - It is important that teams foster trust, mutual respect, availability, open communication and attentive listening. Did you see these qualities displayed during your experience?
- Was your experience on rounds a good representation of your definition of interprofessional communication and collaboration, and client-centred care?
  - If yes, explain why?
  - If no, provide examples of what could have made it a more positive environment that fits your definition.

Complete reflection sheet.

5. **Site:** State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: St. Boniface Hospital, Cardiology and Emergency departments.

**Population:** Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: *Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.*
Practice Setting: Check all that apply.

- Community Agency
- Hospital
- Other __________________________
- Personal Care Home
- Primary Care
- School
- Private Home
- Other __________________________

Student Professionals Involved: Check all that apply.

- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Nurse Practitioner
- Occupational Therapy
- Patient/Client Pharmacy
- Physical Therapy
- Physician
- Physician Assistant
- Physician/Surgeon
- Practice Managers
- Rehabilitation Assistant
- Respiratory Therapy
- Social Work
- Speech Therapy
- Spiritual care
- Teachers
- Other __________________________

Professionals Involved: Check all that apply.

- Audiology
- Dietitian
- Healthcare Aide
- Homecare
- Nurse
- Nurse Practitioner
- Occupational Therapy
- Patient/Client Pharmacy
- Physical Therapy
- Physician
- Physician Assistant
- Physician/Surgeon
- Practice Managers
- Rehabilitation Assistant
- Respiratory Therapy
- Social Work
- Speech Therapy
- Spiritual care
- Teachers
- Other __________________________

6. Stage of Education: Check all that apply.

- Beginner
- Advanced beginner
- Intermediate
- Advanced intermediate
- Expert
P 24 Cultural Competence

Interprofessional Collaboration (IPC) Learning Activity

“Interprofessional education (IPE) occurs when two or more professionals learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO 2010)”

This document is designed to provide a framework for the planning and execution of an IPC learning activity. Parts 1-5 have been filled out for your convenience to explain and direct the beginning of the activity. Parts 6-8 are for you to fill out, as they are variable with each activity. Use the tools presented such as the checklist and timelines to help you with the execution of the activity. An appendix is provided at the end of the document for further clarification.

1. Competencies:
   - Role Clarification
   - Interprofessional Team Conflict Resolution
   - Team Functioning
   - Interprofessional Communication
   - Collaborative Leadership
   - Client-centred Care

2. Activity Summary

Throughout this activity you and four or more students will come together, discuss and become familiar with the topic of cultural competence. After doing background research students will evaluate the resources, critique the availability, and describe the level of cultural competence at their site as well as define the position of their site on the cultural competence continuum.

3. Learning Objective:

Purpose:

1. Students will become familiar with the meaning of delivering culturally competent care.
2. Students will think critically as an interprofessional team about ways to tailor care to encompass the elements of cultural competence.
3. Students will work within a group of professionals to evaluate health services in a responsive and collaborative manner to enhance health care and outcomes.
4. Students will have the opportunity to develop skills in the competency areas of collaborative leadership, interprofessional communication and client-centred care.
Expected outcome: Check all that apply.

- Describe
- Explain
- Demonstrate
- Evaluate
- Critique

1. Students will be able to describe what it means to deliver culturally competent care, and how that care coincides with the goals of client centered care.
2. Students will be able to evaluate its availability and demonstrate ways to incorporate culturally competent care into their practice through collaboration with other health professions.
3. Through collaborative leadership and communication with other student professionals, students will be able to determine two ways to effectively introduce culturally competent care at more systemic levels.

4. Steps to completing learning activity: Use this checklist as a guide to help plan and execute your learning activity. Check off a step after you complete it.

   □ Find other students from a different profession (at least three, but the more you have the more insight you can gain). If you are unaware of other students currently at your site, ask your clinical coordinator to assist you in contacting other professions

   □ As a group of students, meet and set up a timeline that works for all of you to complete the activity.

   □ Research on the meaning of cultural competence, and how it applies to healthcare.

   □ Meet as a group to examine the site and evaluate its organizational cultural competence (this can be done in pairs within the group). What services are readily available at your site? Be observant to what is going on around you at your site as well.

   □ Individually, have each student discuss individual cultural competence with your educator or fellow co-worker(s) in his or her profession (remember it can be beneficial to get more than one opinion).

      o Do they feel they are equipped to deliver culturally competent care?

      o Are they provided with the opportunities/training to develop this skill?

      o Ask them about resources that they know are available at their site. These could include interpreter services, religious and spiritual care services, alternate therapy services, etc.

         ▪ Have they utilized any of these resources to deliver care?

         ▪ If possible, discuss an instance where they found they were unable to deliver culturally competent care to a patient due to the lack of resources at their site.

         ▪ What are some resources that they think could potentially benefit their site?
After reviewing the information sheet, and completing the previous steps come together as a group and analyze the following:

- In reference to the cultural competence continuum (http://cedp.mohawkcollege.ca/documents/Phase1_2016/5%20Managing%20Diversity/Cultural_Competency_Continuum.pdf)
  - Where do you believe healthcare in Manitoba is located along this continuum?
  - Where do you believe the site you are currently at sits on the continuum?
  - After what you learned from some of your co-workers, and from observation, where do you believe your profession at this site sits on the continuum?
    - Did some professions rank higher than others on the continuum? Why do you think this was, and how did you come to this conclusion as a group?
     - You may find this changes depending on which student professions you have included within your group
  - Based on where you placed each category on the continuum. What are some things that you think could be done to move each category towards cultural proficiency (if you didn’t already place them in this category)?
    - Give two examples of things that could be done at each of the levels (individual, organizational, and system-level of cultural competence) to increase cultural competence for health care in Manitoba, at your current site, and within your profession.
    - Remember this is a group activity, and you can provide input for more than just your own profession. The point is that other professions may be able to provide different insight and you all learn from each other’s experiences.
  - Do you think the resources that are available efficiently address cultural competence and allow your site to deliver culturally congruent care to all clients?
    - Provide an example of why you think this.
    - Of the resources that each student found at your site, how many professions were aware that they existed, or had ever utilized them?
  - From the student professions in your group, did you find that some professions were more aware of resources available?
    - If yes, what factors, if any, do you believe could have contributed to this?
  - Culturally competent care and client-centred care have their differences. Knowing what you know now about health services available, whether they are
being utilized or not, are there other limitations to the delivery of culturally competent care other than the services available?

- How can these issues be addressed and allow for change? Give a brief description of how you think delivering care that recognizes the impacts of marginalization can be achieved?

☐ In your interprofessional team evaluate the team's collaborative leadership and communication strategies.

  - Were all professions heard during evaluation of current health care practices about cultural competence?
    - If no, what contributed to this?
      - Was there a systematic way during discussion that allowed everyone’s thoughts/concerns to be heard, or was it a free for all discussion?

  - Do you think that depending on the circumstances or members of the group, different team development and communication strategies should be utilized?
    - Discuss and provide two examples of situations that would require a different team dynamic.
    - For example, immediate emergencies may display different communication strategies than those needed to discuss development of new practices/resources needed to change health care delivery.

  - In terms of collaboration, was it responsive and respectful?
    - Did the conversation stay directed towards improving health outcomes as it pertained to cultural competence?
    - Was the work equally divided between participants, with everyone participating to reach the final goal?
    - Was everyone’s opinion valued and considered when discussing solutions?

☐ After discussing and learning from your group, provide four examples of how you will incorporate more culturally competent and congruent care into your practice.

☐ Complete reflection sheet.

5. Site: State the primary and secondary sites of the education activity. This includes the physical location such as a hospital or clinic and departments. For example: St. Boniface Hospital, Cardiology and Emergency departments.
Population: Outline the target population for the education activity. Be specific as per the demographics including gender, socioeconomic status, age, culture, condition, location of residence, etc. For example: Patient population: low income males between ages of 30-45 with diabetes living in Winnipeg, Manitoba.

Practice Setting: Check all that apply.

☐ Community Agency
☐ Hospital
☐ Other __________________________

☐ Personal Care Home
☐ Primary Care
☐ School

Student Professionals Involved: Check all that apply.

☐ Audiology
☐ Dietitian
☐ Healthcare Aide
☐ Homecare
☐ Nurse

☐ Nurse Practitioner
☐ Occupational Therapy
☐ Patient/Client
☐ Pharmacy

☐ Physical Therapy
☐ Physician/Surgeon
☐ Physician Assistant
☐ Practice Managers

☐ Respiratory Therapy
☐ Social Work
☐ Speech Therapy
☐ Spiritual care
☐ Teachers

Professionals Involved: Check all that apply.

☐ Audiology
☐ Dietitian
☐ Healthcare Aide
☐ Homecare
☐ Nurse
☐ Nurse Practitioner

☐ Occupational Therapy
☐ Patient/Client
☐ Pharmacy
☐ Physical Therapy

☐ Physician Assistant
☐ Practice Managers
☐ Psychologist
☐ Rehabilitation Assistant

☐ Respiratory Therapy
☐ Social Work
☐ Speech Therapy
☐ Spiritual care
☐ Teachers
6. **Stage of Education**: Check all that apply.

- [ ] Beginner
- [ ] Advanced beginner
- [ ] Intermediate
- [ ] Advanced intermediate
- [ ] Expert
Appendix: Definitions

Competency Definitions:

1. **Role Clarification** – To understand their own roles and the roles of those in other professions. To use this knowledge appropriately to establish and meet patient/client/family and community goals.

2. **Team Functioning** – Learners/practitioners understand the principles of team dynamics and group processes to enable effective interprofessional team collaboration.

3. **Interprofessional Team Conflict Resolution** – Learners/practitioners actively engage self and others. Including the patient/client/family, in dealing effectively with interprofessional conflict.

4. **Collaborative Leadership** – Learners and practitioners work together with all participants, including patients/clients/families, to formulate, implement and evaluate care/services to enhance health outcomes.

5. **Interprofessional Communication** – Learners/practitioners from varying professions communicate with each other in a collaborative, responsive and responsible manner.

6. **Client-Centred Care** – Learners/practitioners seek out, integrate and value, as a partner, the input and the engagement of patient/client/family/community in designing and implementing care/services.


Learning Stage Definitions:

1. **Awareness/Exposure**: An introduction to interprofessional collaboration practice. The activities primarily focus on role clarification and interprofessional communication.

2. **Immersion/Application**: An advancement of the depth and breadth of interprofessional collaboration practice. This level requires greater participation and interaction to develop skill, attitude and judgement. The activities address all six competency domains.

3. **Mastery/Integration/Competence**: The highest level of interprofessional collaboration practice. The learner focuses on integrating knowledge and skill in decision making and planning of collaborative care.


Guide to Interprofessional Activities in Practice Environments
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## Appendix: Profession specific stages of learner

<table>
<thead>
<tr>
<th>Professional Field</th>
<th>Stages</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Occupational Therapy</strong></td>
<td>Basic</td>
</tr>
<tr>
<td><strong>Physical Therapy</strong></td>
<td>Beginner</td>
</tr>
<tr>
<td><strong>Respiratory Therapy</strong></td>
<td>1st Year Clinical</td>
</tr>
</tbody>
</table>
Appendix: Reflection sheet

Name: 

IPE Activity Selected: 

Thinking about your experience working through this activity, reflect on the following questions:

What interprofessional collaboration competencies did you work on during this activity? The competencies will be listed on the first page of the activity you are working on.

What did you learn personally and/or professionally about yourself and others from completing this interprofessional collaboration activity? Can you relate this to one or more of the interprofessional collaboration competencies?

Name at least 1 area of personal or professional strength that you demonstrated during this IPE activity and describe how it contributed positively to the completion of this activity.

Name at least 1 interprofessional collaboration competency for further development to enable you to be a better collaborator in future clinical placements / future practice. How would you address these areas for development? Form at least 1 SMART goal for each area for development. See the Appendix on SMART goal setting if you need a refresher on SMART goals.

Based on what you know so far and what you have experienced from this activity, what does interprofessional collaboration mean to you as a student healthcare provider?
Thinking about your future as a healthcare provider, list one thing that you will take away from this experience to adopt into your future practice.
Appendix: SMART goal setting

SMART goal setting is a way of setting realistic and measurable goals. It has been used in multiple fields including business and healthcare. There are multiple variations of what SMART stands for, however, I recommend the following:

S – Specific (What will be completed?)
M – Measurable (How will we know that the goal has been completed?)
A – Action-oriented (Is the goal based on an action that is completed by the client/patient and/or will be completed for the client?)
R – Realistic (Is the goal realistic for the client/patient?)
T – Time-bound (When should the goal be completed by?)

As an example:

Mrs. Jones will complete range of motion exercises post-left hip total arthroplasty.

The above goal is not a SMART goal as it does not satisfy all five components of a SMART goal. As a way to revise this goal to become a SMART goal, we can say:

Mrs. Jones will independently complete daily passive and active range of motion exercises as prescribed by the physiotherapist post-left hip total arthroplasty as evidenced by the completion of the provided checklist for three weeks.

In this revised goal, we have satisfied the SMART criteria

S – Range of motion exercises prescribed by the physiotherapist
M – Completion of a checklist that identifies the days of the week and a place to check off when the active and the passive range of motion exercises have been completed. This checklist includes all of the days of the week for three weeks.
A – Action will be completed by Mrs. Jones actively and independently
R – Mrs. Jones was prescribed the range of motion exercises because the physiotherapist believes that it is realistic for Mrs. Jones to complete these exercises.
T – Three weeks

For more information, consult relevant course notes or the following resources:

Queen’s University – https://sass.queensu.ca/goal-setting/
