


## Interprofessional Mental Health Undergraduate Education: Lessons Learned



Olga Heath, Psychologist  
 Anna Marie Alteen, Nurse Educator  
 Taryn Hearn, Psychiatrist  
 Leslie Phillips/Carla Dillon, Pharmacist  
 Ellen Oliver, Social Worker  
 Pamela Button, Research Coordinator

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### Objectives:

1. Describe the Memorial University Interprofessional Education Framework
2. Describe how the Mental Health Module fit in the framework
3. Discuss challenges and successes associated with developing, implementing, evaluating and revising the course over 3 years
4. Present results of the quantitative and qualitative student evaluation of the Mental Health Module


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### Interprofessional (IP) Collaboration and Mental Health Care

- Health professional students need to begin Interprofessional Education (IPE) early to begin process of socializing students into collaborative care (AIPHE, 2009) <http://www.afmc.ca/aiphe-afiss/home.html>
- Mental Health as an obvious focus for classroom IPE
- Recognition of importance of IP collaboration in mental health intervention
- Collaborative relationships between mental health care providers do not occur without effort

Claven & Bland (2008) Identifying Best Practices in Collaborative Mental Health Care: An Analysis of the Evidence Base. Presentation at 7th National Conference on Shared Mental Health Care, Calgary, Alberta

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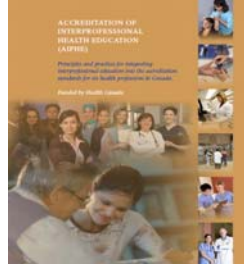
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# Why is Interprofessional Education (IPE) Important?

- IPE standards for accreditation\*
  - "Interprofessional education is most effective when integrated explicitly into classroom and practice contexts for learning." (AIPHE, 2009)
- A significant portion of Health Professional training takes place in practice learning placements



\* <http://www.afmc.ca/aiphe-afiss/home.html>

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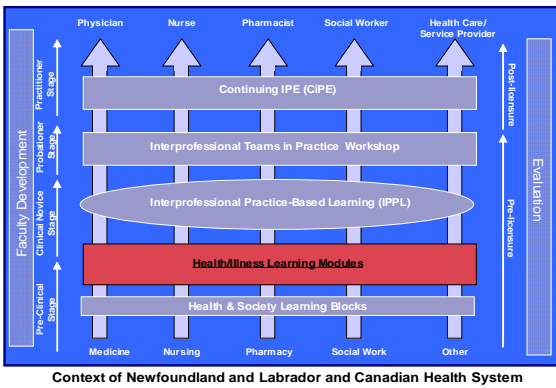
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## at Memorial University of Newfoundland




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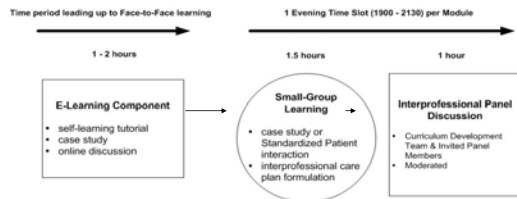
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## Interprofessional Education Modules Blended Learning Instructional Design Model



### Assessment Standard for Interprofessional Education Curriculum

- Assessment of student participation and/or performance in Interprofessional Education (IPE) curriculum is based on evaluation criteria established by individual programs. Please refer to your program's assessment criteria to determine requirements and expectations.

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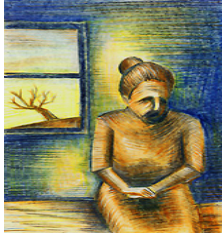
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## Interprofessional Mental Health Care Module



- Offered for 3 years (2006 - 2008) for:
  - Medical students (2<sup>nd</sup> pre-clerkship year)
  - Nursing students (3<sup>rd</sup> year)
  - Pharmacy students (final year)
  - Social Work students (final year)
- Case based
  - Focus: geriatric depression

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## Year One (2006)

Medicine  
Nursing  
Pharmacy  
Social Work

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## Year One (2006) Content and Structure



- Case based
  - Geriatric depression, multiple issues including possible financial and physical abuse
  - 2 week online case information, support and guided IP posts
  - Small IP group discussion about case and IP interaction
  - Facilitated large group discussion with IP panel

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## Year One (2006) Participation

- All four faculties/schools participated
  - Medicine (n = 61)
  - Nursing: 2 schools - one by videoconference (n=111)
  - Pharmacy (n = 20)
  - Social Work (n = 43)




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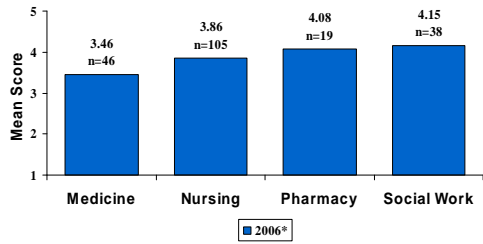
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Mean Satisfaction Scores for the Mental Health Module - 2006



\* Nursing, social work, and pharmacy had significantly higher mean scores than medicine (p<.05)

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## Medicine (2006): Qualitative Thematic Analysis

- Liked:
  - Enjoyed having all four disciplines present
    - *"It was fantastic to have representation from the 4 disciplines. This is definitely better than just nursing and medicine."*
- Change/Improve:
  - Eliminate online discussions
    - *"Most people do individual posts and don't tie in the other comments. Seems very unproductive."*
  - IPE sessions too close together
    - *"(change) The timing - we've just finished another session less than 1 week ago."*




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## Nursing (2006): Qualitative Thematic Analysis



- Liked:
  - Different perspectives of the other professions/students
    - *"The chance to learn more about the other disciplines and discover the benefits of each discipline of the health care team. Allows us to see and realize the importance of working in a team to achieve better care of the patient."*
  - Group discussion (small group)
    - *"Working in the small groups allowed me to see other views and aspects of the case studies."*

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## Nursing (2006): Qualitative Thematic Analysis

- Change/improve:
  - Lack of interdisciplinary focus for students for students in Corner Brook (i.e., only nursing students)
    - *"Corner Brook is at a disadvantage because of location and one discipline. We could not meet with any other disciplines."*
  - Evening time slot and time commitment
    - *"November is a busy time with a lot of exams and assignments."*
  - Online e-learning component
    - *"The online learning portion didn't seem necessary after we discussed the whole scenario again in the group discussion."*




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## Pharmacy (2006): Qualitative Thematic Analysis



- Liked:
  - Face to face small group interaction
    - *"The face to face small group discussion was really interesting, informative and helpful. I learned a lot about the scope of practice of other professions."*
  - Getting to know other professional roles
    - *"It was helpful to get some first hand knowledge of the skills and capabilities of the other professions."*
  - Informing others about the role of pharmacy
    - *"Get out there what a pharmacist is capable of doing and what our actual jobs do."*

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## Pharmacy (2006): Qualitative Thematic Analysis

### Change/Improve:

- Better discussion of treatment approach
  - *"The ideas brought up were too general. We didn't discuss what each individual profession could bring to the situation."*
- Have more discussion regarding professional roles and abilities
  - *"There should be an opportunity for the discussion or exploration of each professional's abilities and roles."*




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## Social Work (2006): Qualitative Thematic Analysis

### Liked:

- Learning about other professions
  - *"Learning about the varied perspectives and having a chance to break down stereotypes."*
- Small group discussion
  - *"I most enjoyed the small group discussion regarding the case study specifically. This allowed the various disciplines to incorporate others ideas."*




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## Social Work (2006): Qualitative Thematic Analysis

### Change/Improve:

- Have equal student evaluation across all schools
  - *"Equal grading in all fields. Having only some groups such as nursing and social work being graded sets an unfair analysis and lack of attendance and involvement."*
- Online e-learning component
  - *"I don't like the online discussion piece. Realistically, with course workload carried in addition to this, I don't think that everyone had the time or took the time to read the other postings."*
- Have more time
  - *"Too short and rushed. Sometimes easier to play nice than get into the crux of the issue."*




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**Year Two (2007)**

- Medicine
- Nursing
- Pharmacy
- Social Work

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**Year Two (2007)**  
**Content and Structure**

- Same case
- Same structure (online discussion, small group activity and facilitated large group discussion with panel)
- Reworded question on stereotypes
  - Curriculum development team saw stereotypes as a significant challenge to interprofessional collaboration in practice
  - Changed focus of question from "What are the stereotypes of each profession?" to "Did you have any stereotypes about health professionals that were dispelled as a result of your participation in this module?"
- Large group discussion became negative and divisive
  - Overall - notably more negative tone

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**Year Two (2007)**  
**Participation**

- All four faculties/schools participated
  - Medicine (n=60)
  - Nursing – no video-conferencing for Western School of Nursing (n=89)
  - Pharmacy (n=17)
  - Social Work (n=41)




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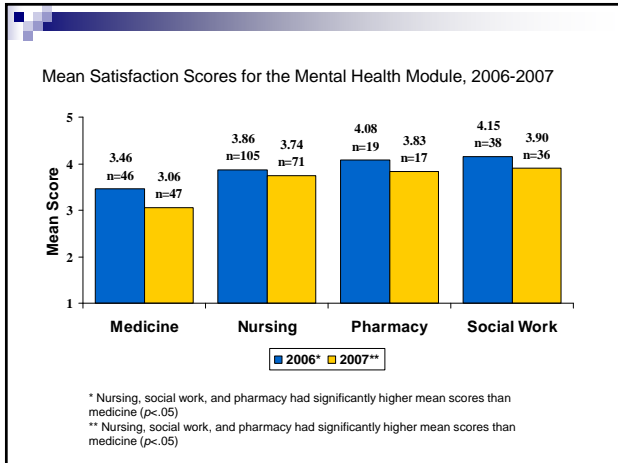
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### Medicine (2007): Qualitative Thematic Analysis



- Liked:
  - Many found little to be positive about
    - "I really didn't enjoy it" "Nothing honestly" "Not the panel discussion!"
  - Enjoyed small group session
    - "I enjoyed the (small) group discussion, it was very interactive...all members were open for discussion and willing to listen to others."

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### Medicine (2007): Qualitative Thematic Analysis

- Change/Improve:
  - Eliminate online discussions
    - "Discontinue online discussion-waste of time."
  - Too many IPE sessions
    - "Way too many IPE sessions for medicine!"
  - The panel needs to operate differently
    - "No physician on panel."; "Facilitator was argumentative and clapping for each side made it worse."; "Panel was slightly hostile."




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## Pharmacy (2007): Qualitative Thematic Analysis

■ Liked:



The case study and small group discussion

- *"Small group discussion was good; actually case itself was really good incorporated everyone's health professions and the roles each play on the team."*

Getting to know other roles

- *"Nice to see everyone's viewpoint; great input from all group members."*

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## Pharmacy (2007): Qualitative Thematic Analysis

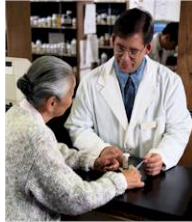
■ Change/Improve:

- Have more than one pharmacy student per group

- *"Please have more than one pharmacy student per group."*

- Improve organization of module

- *"Small group session could be more organized. There was not enough time to develop a care plan and answer all of the panel discussions."*




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## Social Work (2007): Qualitative Thematic Analysis

■ Liked:



- Involvement of all professions/students
  - *"Involvement of all health professions equally."*

- Understanding of roles

- *"This was the best interprofessional meeting I was involved in. People seem to become more aware of each other's roles in healthcare."*

- Interest in topic

- *"The topic was interesting and it appeared that all students were knowledgeable on the area (in comparison to some other module topics)."*

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## Social Work (2007): Qualitative Thematic Analysis

### Change/Improve:

- Repetition of e-learning and irrelevance
  - *"E-discussions were repetitive. After reading two posts, you've read them all."*
- Panel and 'putting one on the spot'
  - *"When reporters gave answers to questions on paper and panel asked more questions, I did not think it was fair to put on spot in front of everyone, especially by other professionals! I feel this ruined the experience as it was unfair."*
- Evening time slot and timing of the module
  - *"It would be nice if this was done earlier in the semester and at an earlier time."*




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## Nursing (2007): Qualitative Thematic Analysis

### Liked:

- Gaining an understanding of professionals roles
  - *"Good understanding of other professionals' roles in mental health and how each profession addresses mental health issues differently."*




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## Nursing (2007): Qualitative Thematic Analysis

### Change/Improve:

- Evening time slot
  - *"It is very inconvenient to have these modules during the night. Most of us have been in school all day and are very tired. Would be better suited at a better time."*
- Online e-learning component
  - *"I would change the way the online discussion was handled, asking individuals to answer one question related to their field."*
- Formality of panel and putting 'reporters on the spot'
  - *"Panel/ group discussion-panel should try to stick to the questions that we discussed in our small groups rather than asking different questions and putting reporters on the spot." ; "Panel-too formal, more grilling then learning."*

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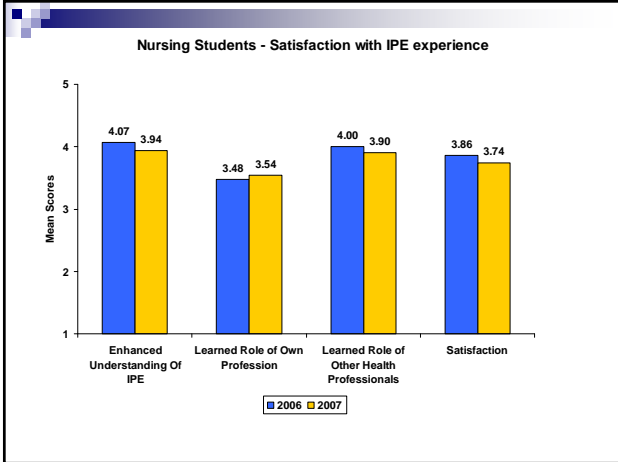
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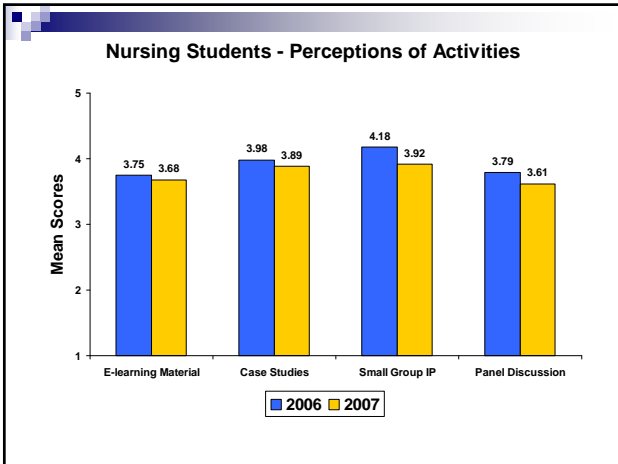
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**Year Three (2008)**

Medicine  
Pharmacy  
Social Work

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### Year Three (2008) Content and Structure

- Case based - geriatric depression
  - simplified case
    - each profession had one clearly defined issue
- Eliminated online discussion
- Eliminated large group panel discussion




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### Year Three (2008) Content and Structure



- Introduced uni-professional small group
  - Case discussion and development of contribution to care plan
  - Led by professional of same discipline
  - Utilized standardized patient in uni-professional group
- Interprofessional small group discussion followed led by professionals

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### Year Three (2008) Participation

- Three faculties/schools participated
  - Medicine (n=63)
  - Nursing - unable to attend due to scheduling difficulties
  - Pharmacy (n=38)
  - Social Work (n=42)




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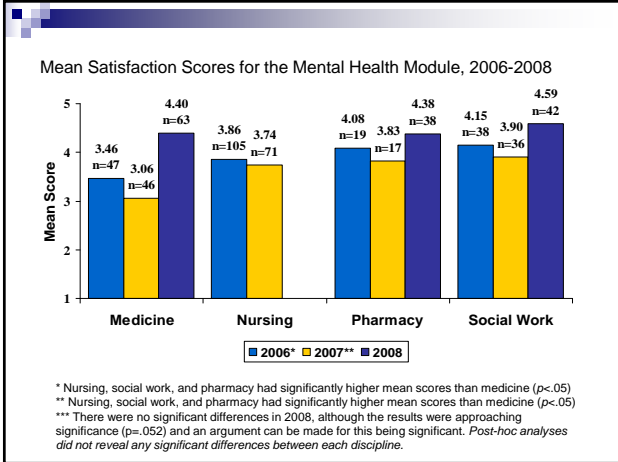
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### Medicine (2008): Qualitative Thematic Analysis



- Overall - notably more positive tone
- Liked:
  - Pleased with new structure
    - "Case study/standardized patient approach with interview and discussion made it feel more like real experiences."
    - "Best IPE experience to date. Great group discussion."
    - "This is the most beneficial (IPE) module we've done to date."
  - Felt module was practical, realistic, well-organized, relevant
  - Many felt it clarified the roles of each discipline
    - "I learned a lot about the way in which the different professions work together to enhance patient care. We each have our own roles with some overlap that come together to provide better patient care."

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### Medicine (2008): Qualitative Thematic Analysis

- Change/Improve:
  - Students hoped nursing would be involved in the future
    - "Get nursing involved- we would have loved their input."
  - Almost 40% of comments in this section indicated that nothing needed to be changed

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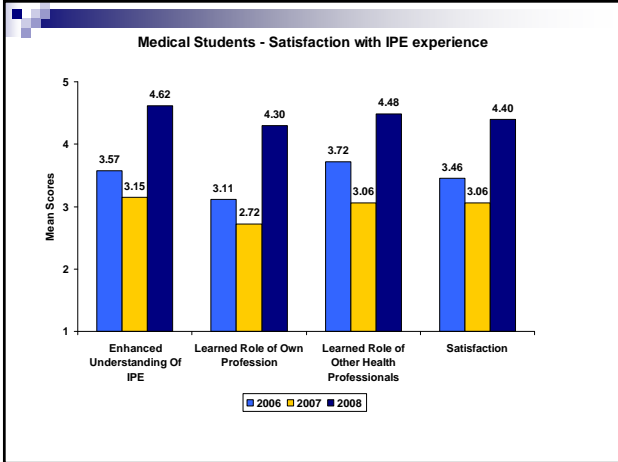
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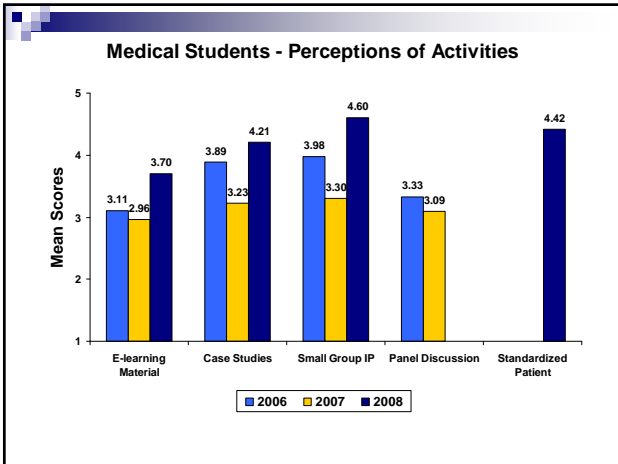
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**Pharmacy (2008): Qualitative Thematic Analysis**

- Liked:
  - The structure of uniprofessional, SP interaction, interprofessional
    - *"I liked the uniprofessional meeting happening first, then team meeting after - helped us all form thoughts."*; *"Uniprofessional followed by multi-professional was realistic and taught me a lot."*
  - No online component
    - *"I LOVED the group interaction and the LACK OF ONLINE."*
  - SP interaction
    - *"The interaction with the SP was very useful."*

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## Pharmacy (2008): Qualitative Thematic Analysis

- Liked:
  - Learned about IP collaboration and teamwork:
    - *"Hearing the different versions of the same story. Everyone brought back different information." ; "Informal discussion with other disciplines was very interesting and useful in understanding the various roles."*
  - How module changed the way one thinks about IP care
    - *"It just reinforced that interprofessional care is so important if we want the patient to receive the best care and for us to appreciate other health care professionals."*

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## Pharmacy (2008): Qualitative Thematic Analysis

- Change/Improve:
  - Should have nursing involved
    - *"Nursing should be involved. I am curious about their role as I didn't feel any gap in knowledge."*
  - More time in small groups
    - *"I would allow more time for the interprofessional meeting."*




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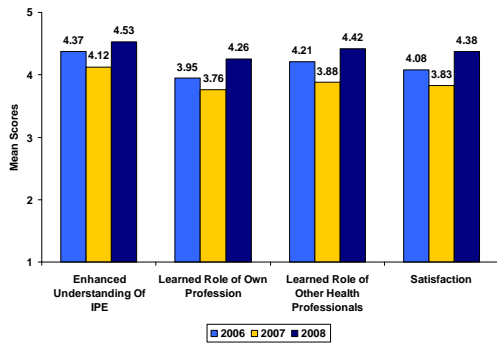
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Pharmacy Students - Satisfaction with IPE experience




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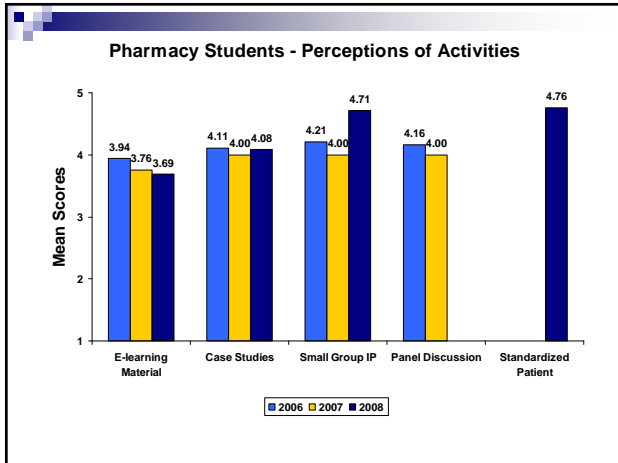
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### Social Work (2008): Qualitative Thematic Analysis

- Liked:
  - SP interaction
    - *"It was the first time, as a social work student, that I have encountered an SP. It was a fantastic learning experience."*
  - Structure of uniprofessional, SP, and interprofessional
    - *"Enjoyed this one most of all I have completed, had chance to do discuss/consult with my own team within field before going to interprofessional team." ; "The case was realistic, we got to interact, discuss and describe the scenario within our own roles before moving to interdisciplinary. Learned roles of other professions."*
  - Relevance and realism of the experience
    - *"I thought that it was a more realistic case that all professionals would benefit from."*

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### Social Work (2008): Qualitative Thematic Analysis

- Change/Improve:
  - Have more time in small groups and with SP
    - *"It may have been more helpful to have more time to interview the client."*
  - Involve more professions
    - *"Add nurses."; All professions including Nursing, SW, Pharmacy, Med. Consult Physiotherapy, OT etc as needed."*



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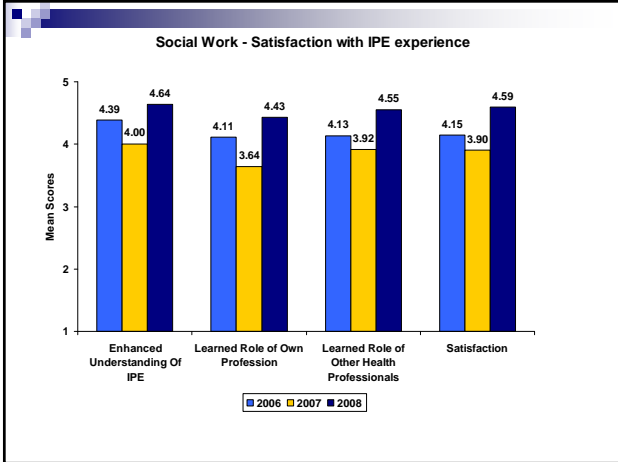
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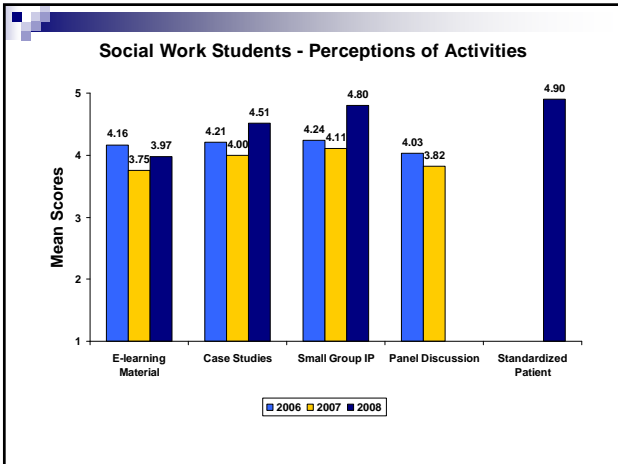
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### Summary: Challenges

- Learning to listen to student feedback
- Large and unequal numbers of students
- Including students at a distance
- Scheduling – common daytime slot in already packed schedules
- Faculty buy-in and compensation
- Training of small group facilitators

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## Summary: Successes

- Responding to student feedback
  - Reduce online component - eliminate discussion
  - Eliminate large group discussion with panel
  - Small group facilitators who are health professionals
- Recognizing that the module needed to reflect what happens in clinical practice
  - Meet unprofessionally with the patient/client and then decide how to proceed as an interprofessional group
    - Increases confidence for students

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## Acknowledgements

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  - Tanis Adey, Psychiatrist (Medicine)
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