Chapter 17
Achieving Interprofessional Health Education Through the Use of E-Resources:
Exploring the Experience of Two Different Undergraduate Professional Groups

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ABSTRACT
This chapter presents a case-study of a large-scale programme of interprofessional health education delivered through a virtual learning environment (VLE) and reusable interprofessional learning objects. The project commenced in 2005/2006, and brought together 1,800 students from 14 different health and social care disciplines in an InterProfessional Learning Pathway (IPLP). Interprofessional e-learning pedagogy and resources were developed to permit asynchronous interactions between large numbers of students from different disciplines, operating in virtual learning sets based around a series of patient scenarios which had been developed with service-user involvement. After the IPLP had run for the first three years, the experience of two of the 14 participating professional groups, dietetics students and physiotherapy students, was explored in 2008 through the use of focus groups and questionnaires. Both student groups felt the IPLP learning experience had a positive impact on their awareness of other roles and interprofessional issues, and offered greater insight into the total clinical pathway of individual patients. Overall, Physiotherapy students found engagement in the IPLP a more useful learning experience than Dietetics students. A range of logistical issues, both positive and negative, were identified by both student groups in terms of the practical processes associated with the complex operation of the IPLP.

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INTRODUCTION

Interprofessional learning is a process through which students and practitioners have structured learning opportunities for shared learning, to enable them to acquire knowledge, skills and professional attitudes that they would not be able to acquire any other way (Funnell, 1995). However, there is evidence that indicates that whilst such interprofessional education provides a valuable learning experience for students (Barr, Koppel, Reeves, Hammick & Freeth, 2005), there are substantial logistical problems associated with the processes of seeking to bring large numbers of students from different professional courses together in a common learning environment (Thistlethwaite & Nisbet, 2007).

In order to seek to overcome these difficulties, in 2005 a novel programme of interprofessional education (IPE), delivered primarily through e-learning, was introduced in the Faculty of Health and Life Sciences, Coventry University. This was called the Interprofessional Learning Pathway (IPLP) and involved the engagement of 1,800 students from 14 different health and social care professions. The first students undertaking the whole three year IPLP completed their studies in 2008. The innovative nature of this programme demanded the development of several new e-pedagogies and e-resources; thus the experience was a novel one for learners and teachers alike (Clouder 2008).

Within this chapter, the impact of this educational intervention is explored with two of the fourteen participating student groups; BSc Physiotherapy and BSc Dietetics. The rationale for focusing in on specific groups was to consider how to improve their students’ experience of the programme. This exploration considers both the learning that occurred and the practical issues, both positive and negative, that were associated with the new mode of delivery. There were several important differences between the physiotherapy and dietetics professional groups; these differences had an impact on how the IPLP learning experience was perceived by the two student groups.

BACKGROUND

A healthcare professional from a single discipline would find it difficult to provide inclusive care that addresses all issues required to improve a patient’s health. An interprofessional approach to treatment enables individuals from various disciplines to share their unique perspectives by integrating information and working as a team to enhance a patient’s health status (Parsell & Bligh, 1998). Interprofessional learning aims to facilitate the communication and collaboration between healthcare professionals, which is required to address each aspect of a patient’s rehabilitation (Lumague, Morgan, Mak, Hanna, Kwong, Cameron, Zener & Sinclair, 2006) by creating a holistic healthcare package through empowering a group of professionals to cope with issues that surpass the scope of any one profession (Barr, 2002).

Interprofessional learning was initially developed for improving the quality of patient care and safety. The importance of developing good interprofessional working relations has been highlighted as a consequence of incidents of patients put at risk or who came to harm (WHO, 1988). In the UK for example, the public inquiry into cardiac surgery at Bristol Royal Infirmary (Department of Health, 2001b) and the death of Victoria Climbié (Department of Health, 2003) both identified the need for radical reform of the education and training of professionals and the need to promote patient-focused collaborative working (Humphris & Hean, 2004). An integral part of the UK Department of Health’s NHS Plan (DoH, 2000) and policy (DoH, 2001a, 2002, 2004; 2006, 2007, 2008; RCP, 2008) has been to improve interprofessional practice and enhance the quality of patient care and safety. Central to the policy is that pre-qualifying students ‘learn with, from,