

## **All Together Better Health III – Challenges in Interprofessional Education & Practice Imperial College, London, UK April 2006**

### *Session: Informing curriculum development*

Group: B3

#### **The RFP Process: An innovative approach to introducing IPE curriculum**

Presented by:

- *Rivie Seaberg, Dean, Community Services and Health Sciences, George Brown College, Canada*

George Brown College (GBC) is one of the largest and most diversified colleges in Ontario Canada, with more than 14,000 full-time students in approximately 150 programs ranging from one-year certificates to four-year bachelor's degrees. In addition, there are more than 50,000 continuing education students enrolled in over 1,300 courses. Educational offerings are aligned with economic growth sectors including: Business and Financial Services, Health Sciences and Community Services, Hospitality and Tourism, Construction, Engineering and Creative Arts.

The Centre for Health Sciences is comprised of 4 Clusters: Nursing, Oral Health, Wellness and Health Promotion, and Health Services Management and Technology. The Dean is responsible not only for these 4 clusters but for over 14 full-time and several part-time programs under the Centre for Community Services. This organizational structure with one Dean has facilitated the rapid and innovative collaboration between programs since the Interprofessional Education (IPE) agenda was initiated 3 years ago.

A recent publication by the Association of Colleges of Applied Arts and Technology of Ontario (ACAATO) stated that 70% of health care professionals are educated at Colleges rather than at Universities, including Nursing, Med-lab, Oral Health, Health Information Management, Paramedics, Orthotics and Prosthetics, etc. Ontario's Colleges therefore need to prepare their students for a changing health-care workplace in which skills related to teamwork and health promotion and prevention are highly valued.

The IPE agenda at GBC includes three components: a stated key principle, 4 learning outcomes and 5 strategies. The "key principle" is that the focus of the education curriculum is on client-centred care, not just the provider's role. The learning outcomes address a number of issues including the relationship of the provider with other health care professionals as it relates to patient-care outcomes.

We recognized that if our IPE agenda was to be successfully implemented we needed to engage faculty in this endeavour in a manner that built on their area of interest. Building on the experience of others, and with the intent of fostering support from within, a Request for Proposals was issued to faculty to submit proposals that demonstrated congruence with IPE learning outcomes.

A Steering Committee was established to oversee the process, criteria for the selection of the IPE projects were identified, information sessions were held and assistance with development of the proposals was provided.

The RFPS that were selected were varied and were linked to the learning outcomes and were exemplars of at least one of the 5 strategies. They included development of Problem Based learning scenarios, clinical partnerships and the identification of IPE client assessment elements.

#### **Co-Authors**

- *Lorie Shekter-Wolfson, Dean, Community Services and Health Sciences, George Brown College, Toronto, Canada*
- *Rivie Seaberg, Director, Centre for Health Sciences*
- *Doug Stulla, Chair, Health Sciences*
- *Gary Kapelus, The Collaborative Practices Group, IPE Consultant and IPE Project Manager*