

Developing intentional interprofessional practice on the West Coast

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Aim/Objectives

To develop workforce and stakeholder awareness, organisational policy, pathways, and strategy for the West Coast rural health workforce in terms of interprofessional practice which supports workforce sustainability and high quality care.

Background

The healthcare workforce is being required to work in collaborative, integrated ways in order to better meet the needs of our increasingly complex population¹. This way of working has been described as Interprofessional in nature, and a growing body of research activity is supporting it's introduction into all aspects of the health and care system^{2,3}.

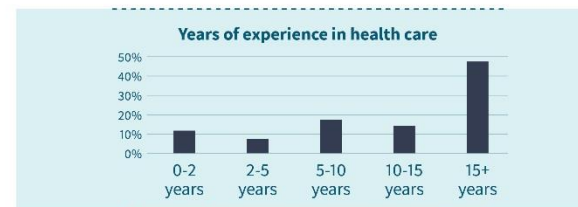
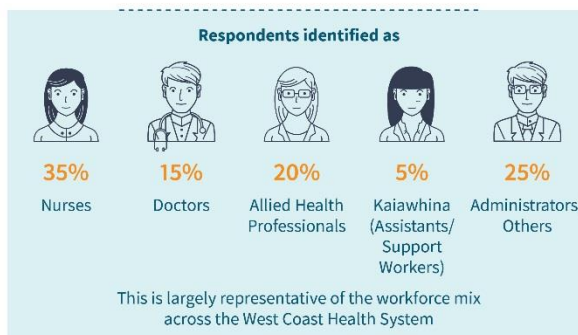
An initial group of WCDHB Clinical Leaders and Educators met in November 2017 to start exploring Interprofessional Practice (IPP) and Education (IPE) on the Coast, including creating a shared understanding of what IPP/IPE is and what it is not. It was recognised this work should be co-ordinated by all interested professionals and so the Interprofessional Practice & Education Roopu was created. The kaupapa of this roopu is to develop a West Coast wide strategy for promoting and implementing interprofessional concepts regarding ways of working and learning.

Methods

Following the formation of this Interprofessional Education Roopu, surveys were undertaken to gauge the level of understanding across the workforce about Interprofessional practice, to gain a benchmark for our programme of work. Information was gathered on the range of interprofessional activities being undertaken, and education sessions were held to introduce the concept of interprofessional practice.

Survey results

85%
of people who started the survey completed it, with every question answered by **at least 50%** of respondents



60% of respondents had heard the term Interprofessional Practice prior to taking the survey

90% of respondents agreed with the statement that interprofessional practice benefits patients by increasing their satisfaction and reducing their length of stay

65% believe they have opportunities to work in this way

85% are comfortable working this way

70% believe they already work this way

Conclusions

It is recognised that in rural settings, interprofessional practice is common, if unrecognised as such. Our analysis of the quantitative data suggests that there is a level of confidence with the activity of interprofessionalism, and that members of all health care settings recognise it's benefits and are comfortable to work in this way.

Next Steps

Seeking further narrative feedback throughout the questionnaire has provided a rich set of qualitative data as well. Given the finding that while 100% of respondents think that interprofessional practice is important but three quarters believe there are barriers, further analysis of this data will be key to creating the platform upon which to build a robust programme of education and intentional implementation.

Following this, the West Coast DHB aim to develop a visible programme of interprofessional education, working in partnership with professional bodies and education providers. In doing so we will be able to strengthen and formalise this fundamental aspect of care.

References

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We're very rural

Driving from Karamea to Haast is the same distance as Palmerston North to Auckland. Developing interprofessional ways of working could assist us to better reach our most rural communities



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