A Rural Journey of Integrating Interprofessional Education to Foster Trust

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Abstract: Interprofessional Education (IPE) is widely recognized as a valuable approach in healthcare education, despite the challenges it presents. This study explores IP surface anatomy lab sessions, with a focus on fostering trust and collaboration among healthcare students. The research is conducted within the context of rural healthcare settings in British Columbia (BC), where a medical school and a physical therapy (PT) program operate under the Faculty of Medicine at the University of British Columbia (UBC). While IPE sessions addressing soft skills have been implemented, the integration of hard skills, such as Anatomy, remains limited. To address this gap, a pilot feasibility study was conducted with a positive outcome, a follow-up study involved these IPE sessions aimed at exploring the influence of bonding and trust between medical and PT students. Data were collected through focus groups comprising participating students and faculty members, and a structured SWOC (Strengths, Weaknesses, Opportunities, and Challenges) analysis was conducted. The IPE sessions, 3 in total, consisted of a 2.5-hour lab on surface anatomy, where PT students took on the teaching role, and medical students were newly exposed to surface anatomy. The focus of the study was on the relationship-building process and trust development between the two student groups, rather than assessing the acquisition of surface anatomy skills. Results indicated that the surface anatomy lab served as a suitable tool for the application and learning of soft skills. Faculty members observed positive outcomes, including productive interaction between students, reversed hierarchy with PT students teaching medical students, practicing active listening skills, and using a mutual language of anatomy. Notably, there was no grade assessment or external pressure to perform. The students also reported an overall positive experience; however, the specific impact on the development of soft skill competencies could not be definitively determined. Participants expressed a sense of feeling respected, welcomed, and included, all of which contributed to feeling safe. Within the small group environment, students experienced becoming a part of a community of healthcare providers that bonded over a shared interest in health professions education. They enjoyed sharing diverse experiences related to learning across their varied contexts, without fear of judgment and reprisal that were often intimidating in single professional contexts. During a joint Christmas party for both cohorts, faculty members observed students mingling, laughing, and forming bonds. This emphasized the importance of early bonding and trust development among healthcare colleagues, particularly in rural settings. In conclusion, the findings emphasize the potential of IPE sessions to enhance trust and collaboration among healthcare students, with implications for their future professional lives in rural settings. Early bonding and trust development are crucial in rural settings, where healthcare professionals often rely on each other. Future research should continue to explore the impact of content-concentrated IPE on the development of soft skill competencies.

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