



BEST EVIDENCE MEDICAL EDUCATION

BEME Spotlight No.9

A best evidence systematic review of interprofessional education

Marilyn Hammick Della Freeth, Ivan Koppel, Scott Reeves & Hugh Barr

Review citation: Hammick M, Freeth D, Koppel I, Reeves S and Barr H (2007). A best evidence systematic review of interprofessional education: BEME Guide no. 9. *Medical Teacher* 29, 8, pp 735-51

Review website: <http://www.bemecollaboration.org/beme/pages/reviews/hammick.html>

Keywords: interprofessional, education, research, outcomes, effectiveness, authenticity, staff development

Headline conclusions:

- Government calls for enhanced collaboration amongst practitioners frequently leads to IPE that is then developed and delivered by educators, practitioners or service managers.
- Interprofessional education is generally well received, enabling knowledge and skills necessary for collaborative working to be learnt; it is less able to positively influence attitudes and perceptions towards others in the service delivery team.
- Staff development is a key influence on the effectiveness of IPE for learners who all have unique values about themselves and others.
- Authenticity and customisation of IPE are important mechanisms for positive outcomes of IPE.
- In the context of quality improvement initiatives interprofessional education is frequently used as a mechanism to enhance the development of practice and improvement of services.

Background and context: Evidence to support the proposition that learning together will help practitioners and agencies work better together remains limited and thinly spread. This review identified, collated, analysed and synthesised the best available contemporary evidence from 21 of the strongest evaluations of IPE to inform the above proposition. In this way we sought to help shape future interprofessional education and maximise the potential for interprofessional learning to contribute to collaborative practice and better care.

Review objectives:

- To identify and review the strongest evaluations of IPE.
- To classify the outcomes of IPE and note the influence of context on particular outcomes.
- To develop a narrative about the mechanisms that underpin and inform positive and negative outcomes of IPE.

Review methodology:

- **Search strategy:** Bibliographic database searches as follows: Medline 1966-2003, CINAHL 1982-2001, BEI 1964-2001, ASSIA 1990-2003 which produced 10,495 abstracts. Subsequently, 884 full papers were obtained and scrutinised. In addition, hand searching (2003-5 issues) of 21 journals known to have published two or more higher quality studies from a previous review.
- **Topic definition and inclusion criteria:** Peer-reviewed papers and reports included in the review had to be formal educational initiatives attended by learners from at least two of the many professional groups from health and social care, with the objective of improving care; and learning with, from and about each other.
- **Data collection, analysis and synthesis:** Standard systematic review procedures were applied for sifting abstracts, scrutinising full papers and abstracting data. Two members of the team checked each abstract to decide whether the full paper should be read. A third member was consulted over any discrepancies. Similarly, each full paper was read by at least two members of the team and agreement sought before passing it to one member of the team (SR) for data abstraction. Other members of the team checked 10% of the abstraction records. Coding into a Statistical Package for Social Scientists (SPSS) data base led to collection of different outcome measures used in the primary studies via the common metric of an adapted Kirkpatrick's four-level model of educational outcomes. Additionally, a narrative synthesis was built after analysis of primary data with the 3-P model (presage-process-product) of education development and delivery.

Implications for practice:

- Staff development in the facilitation of IPE is essential to its effectiveness.
- Teachers need to be aware that learner reaction to IPE is related to multiple factors.
- Learning about being interprofessional in a context that reflects the students' current or future practice is important for effective learning.
- IPE curriculum developers need to recognise the adult learning needs of the participants and structure teaching with this in mind.
- Staff should seek funding for robust evaluations of IPE especially for that delivered in real and simulated practice settings and to measure its impact on attitudes and behaviour.

Edited by Professor Marilyn Hammick, BEME Consultant, 2008

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Association for Medical Education in Europe (AMEE), Tay Park House, 484 Perth Road,
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