



a place of mind



UNIVERSITY OF
TORONTO

The Need for Common Language and Understanding:

Exposure vs Immersion
Interprofessional Learning

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Introductions

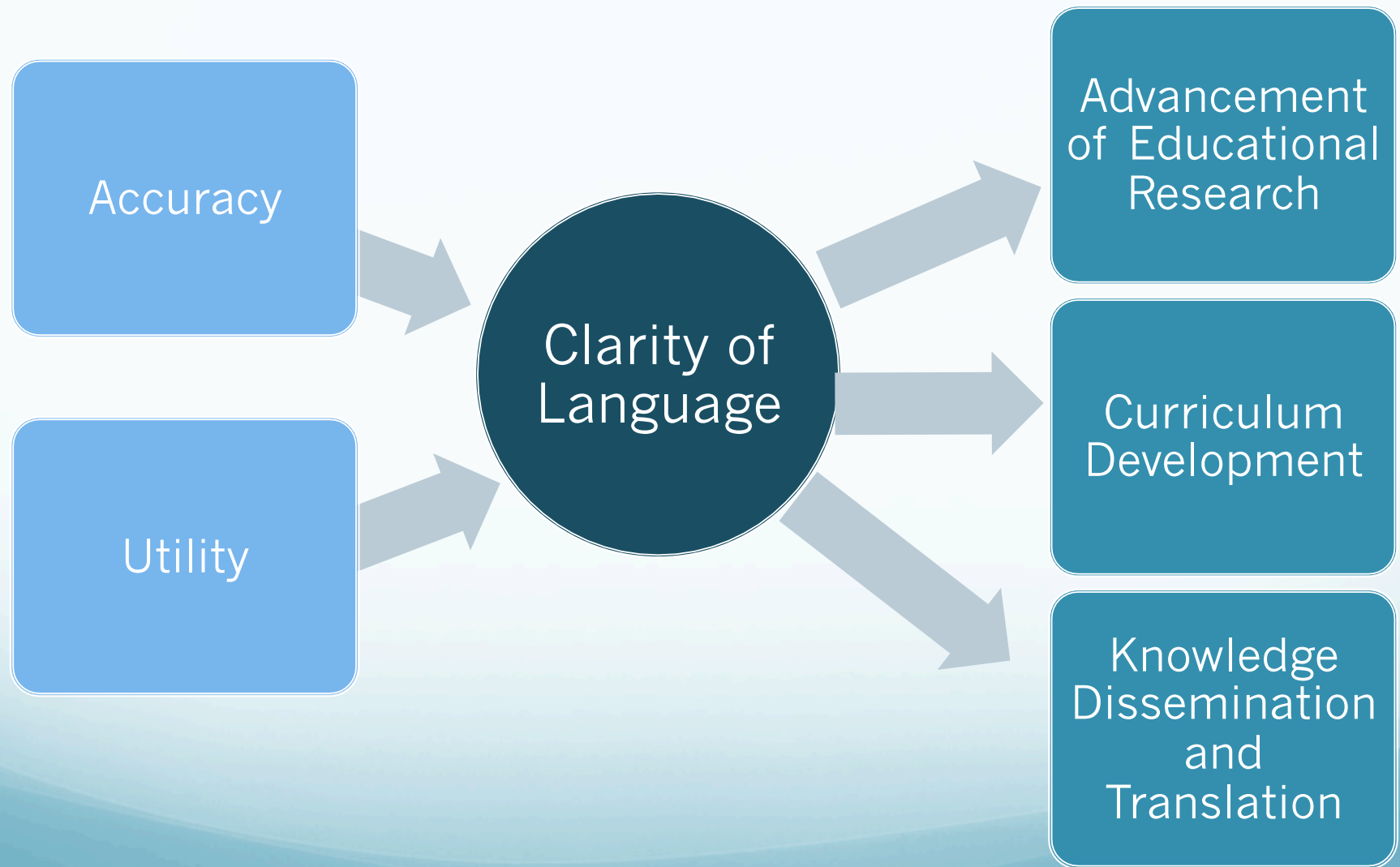


- Name
- Institution
- Role
- What has drawn you to this discussion?

“None of us are as smart as all of us”
Japanese Proverb



Common Language



Contextual Influence on Understanding of Language



Country



Educational
Institution



Health
Profession



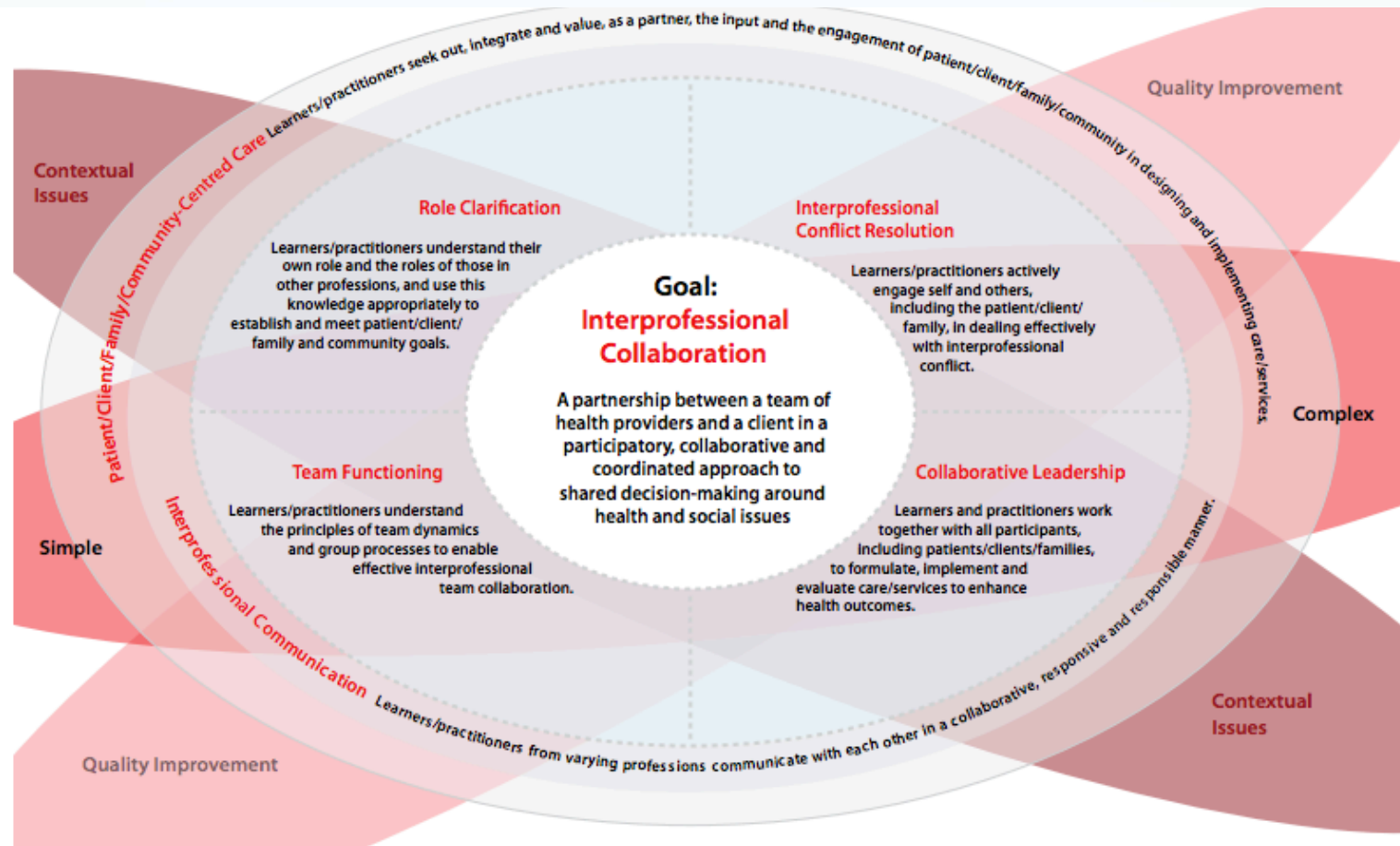
Practice
Setting



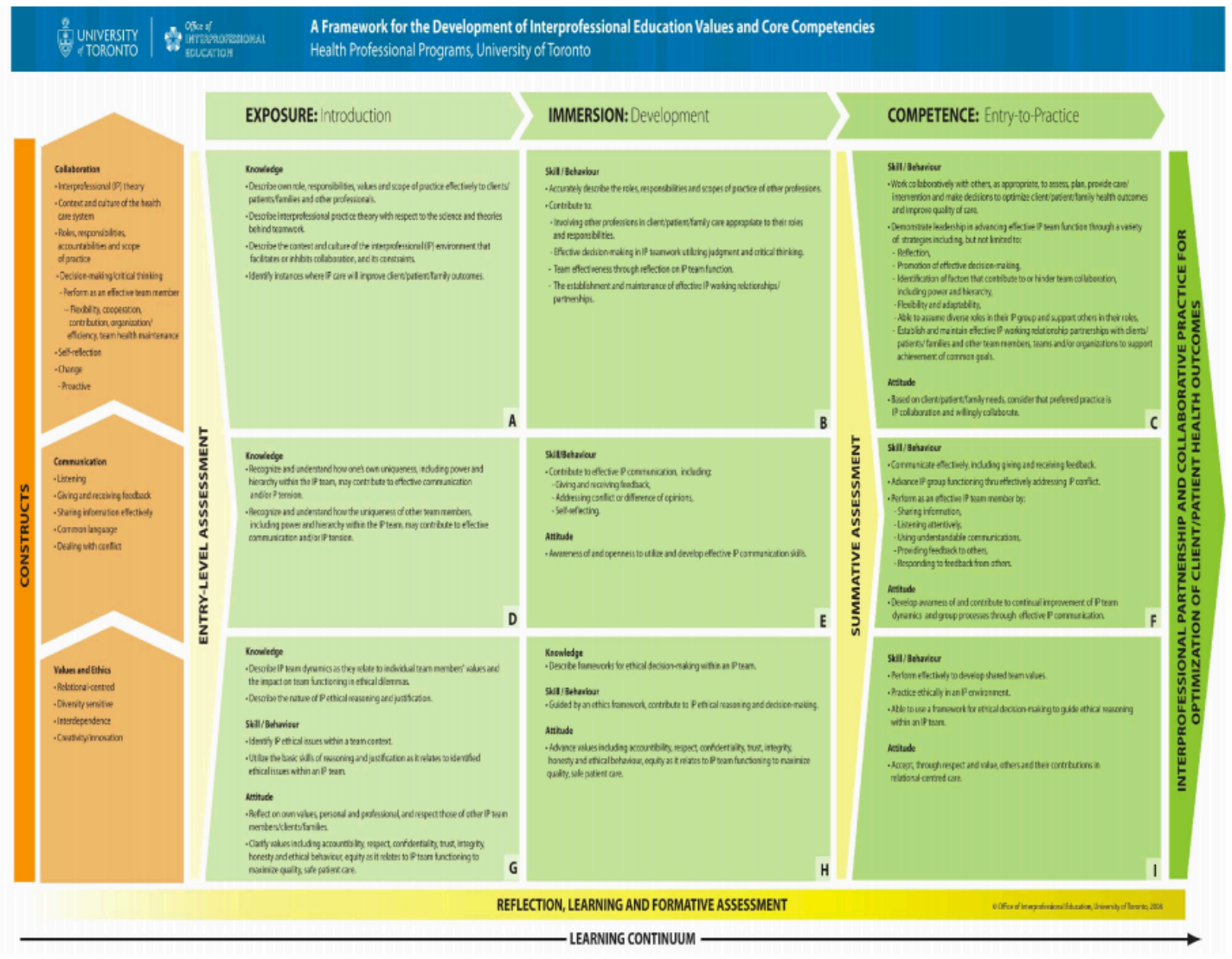
What informs IPE Pedagogy?

- Competency-based approach to education
- IP Competency Frameworks
 - Canadian National Competency Framework
 - University of Toronto Competency Framework
 - American Core Competencies for Collaborative Practice

Canadian National Competency Framework



U of T Competency Framework



American Core Competencies for Collaborative Practice

Interprofessional Collaborative Practice Competency Domains

Competency Domain 1:	Values/Ethics for Interprofessional Practice
Competency Domain 2:	Roles/Responsibilities
Competency Domain 3:	Interprofessional Communication
Competency Domain 4:	Teams and Teamwork

What informs IPE Pedagogy?

- Generic educational theories
 - Adult learning; Transformative learning; Constructivism
- Theoretical frameworks for IPE
 - Contact Hypothesis; Community of Practice; Cultural and Human Development
- Other Literature

Classification of IP Learning

Learning occurs along a continuum:

- Exposure/Immersion/Mastery or Competence
- Novice/Intermediate/Advanced

Classification of IP Learning

Development of IP Points Systems

- Used by both institutions
- Criteria that ensures the necessary components of IP teaching and learning are present
- Points are assigned
- Guidelines are provided to health professional programs on:
 - how many points their students require in order to graduate
 - amount of exposure and immersion learning

Points Awarded for....

- Realistic/authentic learning activities that mirror real - life healthcare teams and healthcare delivery
- Interactive instead of didactic
- Facilitators from different professions and educated to provide IPE
- Explicit IPE learning outcomes
- Debriefing period after IPE learning activity
- Minimum of three professions involved

Points Awarded for....

- Case-based learning
- Frequency of sessions (many interactions across length of training)
- Learning context (online vs face-to-face)
- Learning is assessed
- Reflection occurs

NOW...Our Common Challenge

- No clear definitions or common language around what constitutes an exposure activity from an immersion activity
- Without this language, it is hard to classify where an IP activity is in the continuum of learning
- Based on intuition (ruling out)
- High points do not always translate into an immersion learning experience



A Flawed System (example)

- **Pharmacy-Dentistry IP Clinic Sessions**
 - Students meet prior to clinic sessions + 2 clinic sessions with a patient
 - 60 points (out of a possible 75)
 - Classified: **exposure**
 - More multi-professional than interprofessional
 - No collaboration around patient care
 - Dentists learn role of pharmacist but pharmacists don't learn much about the dentists

Existing Definitions

Exposure Level

An **introductory** level activity that provides students with the opportunity to **interact** and learn about their peers from other professions. In this stage, students are still learning about their **own profession** as they are **beginning to learn about other** professional roles and scopes.

Existing Definitions

Immersion Level

An **extended** IPE experience that provides students from different professions the opportunity to **learn about, with and from one another around a patient*** At this stage students have a more advanced knowledge of their profession gained through classroom and practice experiences. Students are provided with opportunities to learn about the strengths and limitations of their profession and **challenge their ways of thinking and interacting with others.**

*Patient/client/family (real or simulated)

(adapted from Charles et. al, 2010)



Group Discussion Topic

- Given contextual considerations we have highlighted, how would you describe characteristics of an **exposure level** learning activity for the IP Communication competency?
- How would you describe characteristics of **immersion level** learning activity for the IP Communication competency?

Descriptors

To support interprofessional collaborative practice, learners/practitioners are able to:

- establish team work communication principles
- actively listen to other team members including patients/clients/families
- communicate to ensure common understanding of care decisions
- develop trusting relationships with patients/clients/families and other team members
- effectively use information and communication technology to improve interprofessional patient/client/community-centred care, assisting team members in:
 - setting shared goals
 - collaboratively setting shared plans of care;
 - supporting shared decision-making;
 - sharing responsibilities for care across team members; and
 - demonstrating respect for all team members including patients/clients/families.

Other Questions?

- How can we better identify the depth and breadth of learning in order to be able to classify an activity immersion vs exposure?
- What language do we use to do this?
- Where does exposure end and immersion begin?

Exposure Level Group Summary

Immersion Level Group Summary

Debrief and Summary

The background of the slide features a series of overlapping, wavy, horizontal bands in various shades of blue and white, creating a sense of depth and movement. The colors transition from a light, almost white blue at the top to a deeper, more saturated blue at the bottom.

Thank you!

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