Academic Preparedness of Social Workers for Interprofessional Education /Collaborative Practice (IPECP)
Amy Sagen, DSW, LSW, MSG

Abstract

The complexity of contemporary societal health and human service needs demands interprofessional collaboration. Interprofessional education (IPE) is a pathway to preparing social work students for collaborative practice. Survey of NASW-PA members reveals less than 27% gained interprofessional knowledge within their curriculum, although 78% believe they are engaged in interprofessional practice.

Methods

Hypothesis: Social workers do not perceive academic preparedness towards interprofessional practice.

Research design: Electronically disseminated mixed method survey of NASW-PA membership.

Measurement tool: A 19-item survey was developed by comparing the CSWE 2015 EPAS and IPEC Core Competencies. Survey piloted (Cronbach alpha 0.82, n=14) by researcher, October 2017. Survey captured self-report data on interprofessional education’s definition, familiarity, and perception of importance of interprofessional education with respect to employment opportunities.


Results

Sample: 304 (n) social workers (N=3951).

Demographics 79% female; 96.7% practiced in Pennsylvania; 37.8% between 40-59 years of age; 39.5% graduating between 2010-2020; 82.6% MSW level practitioners; and 13% were enrolled in IPE program in school.

Results: Attainment of IPE Knowledge 73% of sample did not obtain interprofessional knowledge within their educational program.

Perceived Engagement in IPP 75% belief of current engagement in IPP, with only 16% accurately defined IPE.

Secondary Analysis of 4 Core Competencies

- Independent variable: cumulative score of AIHC’s four core competencies.

Females, MSW level practitioners, and persons who actively pursued interprofessional training, post graduation were three dependent variables found to be statistically significant (p < .05). MSW educated practitioners (M=56.9, sd=8.62, p<0.035) practitioners was significant versus BSW (M=52, sd=9.72), whereas DSW educated practitioners (M=61, sd=3.24) scored the “most prepared” to practice in IPP setting.

Discussion

The hypothesis, supported through descriptive statistics, revealed attainment of interprofessional knowledge outside of the educational setting (72.7%), social worker’s inaccurately defining interprofessional education (84%) and perception that social workers are not educated to become leaders of interprofessional teams (84%). Yet, 75% of the respondents claimed they were engaged in interprofessional practice in their current setting and 76.3% of the respondents “strongly / agree” interprofessional skills should be a priority in social work education.

The predominant finding is social workers do not perceive their educational curriculum prepared them for interprofessional practice.

Three questions were raised within this research project and relate to secondary findings. These findings refer to advocacy and value loss of social work profession as many respondents believe they are engaged in interprofessional practice yet have “no voice” on their team. This relates to the social work profession’s loss of value as leaders on interprofessional teams and the perpetuation of professional stratification, in the majority of respondent’s practice settings.

Lastly, secondary analysis reveals some social work populations score high on interprofessional practice skills (see secondary analysis under results). However, social workers do not recognize the transferability of these skills to engage specifically in interprofessional practice.

Conclusion

Social workers do not perceive educational preparedness towards interprofessional practice. Descriptive statistics reveal 73% of the sample did not receive interprofessional terminology, coursework, or opportunities within their academic experience. Future research is recommended to determine the impact and relevance of interprofessional education for the future of the social work profession.

References