

Interprofessional education in Canada: A focus on Nova Scotia and rural environments

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Objectives: Interprofessional education [IPE] is a collaborative approach to post-secondary education of social service and health care students. In IPE, students from two or more professions learn about, from, and with one another. IPE is well-established globally and in Canada as proponents believe that interprofessional collaboration in practice settings improves health outcomes. As such, IPE can contribute to the development of healthy rural communities in Nova Scotia through the education of the future social service and healthcare workforce.

Methodology: We performed a Canada-wide environmental scan of IPE programs and a needs assessment of health and social service providers who oversee student placements. The methods we employed were threefold. First, we conducted a scan of Canadian university and college websites to identify which institutions offer IPE programs, courses, and events. Second, we surveyed health and social service providers who oversee student placements to understand their experiences of student preparedness for working in collaborative social and healthcare practices. Third, we interviewed educators within IPE programs and health and community service providers to capture their perspectives as to how IPE needs to innovate to better prepare students to work in social service and healthcare given the current sociopolitical and economic landscape.

Outcomes: We identified 103 post-secondary institutions across Canada that offer IPE programs, courses, and/or events. Of these, we identified six IPE program/courses/events in Nova Scotia, two of which are at colleges and four at universities. Of these, only one predominately urban institution offers a formal IPE program, while the other five institutions offer one or more classes or events that feature IPE. Survey and interview data offer models of successful rural IPE after which Nova Scotian post-secondary institutions could base emergent IPE. Such models consider changing student and community demographics due to immigration and population aging, as well as working with(in) rural and Indigenous communities. However, participants share several barriers affecting the successful implementation of IPE, including lack of funding, time, and infrastructure.

Conclusions: We will conclude by offering recommendations as to how IPE could be integrated into the new Cape Breton Medical Campus, in partnership with Dalhousie University, which could contribute to the development of healthy rural communities in Nova Scotia.