Focus on Health:
Interprofessional Education,
Research, Service and Practice
in the Saint John Area

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Please note that that the views expressed in this document represent my personal opinions. They have been reviewed for accuracy by the IPE project facilitators. They have been neither discussed with nor endorsed by educators in the Department of Nursing or other health education programs.

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What would the ideal post-secondary system for New Brunswick look like?

Health would be a significant focus for partnerships in education, research, service and practice at UNB Saint John. Health care professionals in Saint John would learn with, from and about each other using recognized strategies for interprofessional education (IPE) in a common facility (co-location).

What should I expect from such a system?

I would expect that the next generation of health care professionals would have both a general and a discipline-specific education. Graduates would be prepared to function as effective team members, competent and ethical professionals, and engaged citizens. Health eductors and practicing health care professionals would have opportunities to partner for research, service and practice.

Context: Health Professional Education in Saint John

At UNB Saint John we have a four-year **Bachelor of Nursing** (BN) degree program delivered by 13 full-time faculty members, approximately 20 part-time faculty members, and 2 full-time support staff members. We have approximately 160 full-time students and have recently received additional funding to increase our enrollments. We also have a **Bachelor of Nursing for Registered Nurses** (BN/RN) stream with approximately 50 part-time students.

There is also a **Bachelor of Health Sciences** (BHS) program (Respiratory Therapy, Radiography, Nuclear Medicine, Radiation Therapy), with each stream involving 2 years of University courses and a partnership with other organizations for the discipline-specific component of their programs. Approximately 50 students are enrolled at one time; one full-time staff member coordinates this program. In addition, a new BHS minor is being introduced. Both the BN/RN and BHS students are integrated into BN specific courses.

Practical Nurses (PN) are educated at the New Brunswick Community College (NBCC), as are a number of other allied health care providers, including medical laboratory technologists and pharmacy technicians. Under the academic renewal process being undertaken at NBCC, the PN program will become a two-year diploma program with expanded content and increased clinical practice hours.

The Department of Nursing collaborates with the UNB Faculty of Nursing on Fredericton campus on curriculum planning; for Canadian Association of Schools of Nursing (CASN) accreditation and Nurses Association of New Brunswick (NANB) program approval; and on a shared Master of Nursing (MN) program under a common Graduate Academic Unit. The MN program

includes preparation for Advanced Practice Nursing (MN-APN) and Nurse Practitioner (MN-NP)streams.

Medical Education is facilitated through partnerships between AHSC and Dalhousie University and Memorial University of Newfoundland Faculties of Medicine. The New Brunswick government has announced that it will initiate a medical education program in Saint John in partnership with Dalhousie University. To create space for this program and to address space constraints at both UNB Saint John and NBCC Saint John, a proposal has been put forward to move all health education programs into a common building, a concept referred to as "co-location".

All of these educational programs partner with the AHSC for **clinical practice placements**. The BN and PN programs both use the nursing units throughout the health region for clinical practice experiences. BHS, MN-APN, MN-NP and medical students all find placements there, as do students in specialty areas such as Social Work, Dietary, Physiotherapy, Occupational Therapy, and Pharmacy. The BN program also has partnerships with a wide variety of community agencies within the region.

Nursing faculty members are currently engaged in a variety of scholarship activities, including research, teaching, service and practice, and many projects require partnering with AHSC and community programs.

UNB Saint John is a partner with NBCC, AHSC, and Dalhousie University in a **Health Canada project on Interprofessional Education** (IPE). This \$750,000 project spans two years and builds on all of the partnerships described above. The focus of the project is on preparing undergraduate (pre-licensure) and practicing professionals (post-licensure) for collaborative patient-centered practice in health care delivery. This project also provides national linkages to nineteen other projects across Canada through the Canadian Interprofessional Health Collaborative.

UNB Saint John faculty and AHSC representatives are part of the **Atlantic Health Determinants Consortium**, a partnership representing university – health authority diads from each of the four Atlantic provinces. This partnership lead to the successful bid for the establishment of the **National Collaborating Centre for the Social Determinants of Health** (NCC-DH) under the Public Health Agency of Canada. These provide linkages not only among universities in Atlantic Canada but also nationally.

In addition to faculty relationships, we are now seeing the initiation of interprofessional student collaboration through the establishment of a **local chapter of the National Health Sciences Students Association** (NaHSSA) with representation from across health disciplines and across learning institutions. Students are also represented on the committees that form the infrastructure for the IPE project.

A strong foundation of partnerships has already been established in Saint John among health education programs, health care delivery systems, and community agencies. We must build on these links to create a strong identity for UNB Saint John around collaborative interprofessional health disciplines education, research, service and practice.

The way forward: Proposals for future growth

- Proceed with the co-location project to put all health professional education programs under one roof. This provides opportunities for educators and students from all disciplines to mix formally and informally, breaking down silo boundaries and reducing professional and cultural differences.
- Combine all health disciplines at UNB Saint John together into one department (i.e., BN, BN/RN, & BHS). Consideration should be given to moving the Bachelor of Medical Laboratory Technology degree program from Fredericton to Saint John and integrating this with the other BHS programs.
- o Implement a system of cross appointments, so that faculty from other departments and faculties with an interest in health can have formal recognition of this work, e.g., The Principle Investigator for the Health Canada project is from a non-health department; since Nursing is making a major contribution to the project, there needs to be a formal link.
- Support the infrastructure that is being built through the IPE project. This might take the form of: assigning responsibility for IPE to a faculty member as part of workload; continuing IPE committees that have been established around post-licensure continuing education, curriculum work, and faculty development; seeking funding opportunities that would support the continuation of work in IPE.
- Establish an advisory committee that is inclusive of stakeholders in health, i.e., educators, students, community agencies, and health consumers. It could be modeled on the current Nursing Advisory Committee and IPE Stakeholders Committee.
- Support the continued development of the local chapter of the interprofessional student association: New Brunswick Health Sciences Student Association (NBHSSA).
- Explore opportunities to make our BN program more flexible to meet the varied needs of our diverse students, e.g., introducing a part-time studies option, adding on-line course offerings, introducing virtual simulated learning experiences, examining pre-requisite requirements, opening additional courses to other disciplines, and moving to an abilities/outcomes-based model of teaching and learning.
- Develop a mechanism for transitioning PN graduates into the BN program.
 The academic renewal at NBCC will make this process easier, but

consideration will need to be given to graduates of earlier PN education. A joint BN-PN educator committee has been established to begin this discussion.

- Explore the opportunities to open faculty development programs to health educators from partner organizations, e.g., Effective Teaching Institute and Discussions on Teaching.
- Expand the use of an IPE education model in course and program curriculum development. This past year the BN/RN and BHS students were part of a communications course that was designed and delivered collaboratively by a team of interprofessional educators, a model that could serve for other courses.
- Explore the feasibility of developing a certificate program for health educators modeled on the Diploma of University Teaching that would assist educators to develop competencies essential for delivering interprofessional education programs.
- Continue the negotiation for clinical practice placements between the BN and PN programs, the AHSC student placement coordinator, and community agencies. This will become more critical with the implementation of changes to the PN program being introduced as a result of the NBCC academic renewal process. There may also be opportunities to introduce innovative clinical practice models.
- Maintain and increase infrastructure in the form of secretarial support, student recruitment initiatives, and academic advising across programs.
 The goals are to maintain student enrolment levels and student retention, ensure adequate record keeping across programs for accreditation and safety, and support faculty in sustaining these complex programs, roles and relationships.
- Investigate opportunities for research collaboration among partners. This would build on the Health Promotion and Research Fund, the Nursing Research Network Committee, IPE project evaluation research, and other existing research projects. One focus under discussion is the simplification of the ethical review process that currently requires completion of two sets of forms with different supporting documentation.
- Continue with cross-appointments on service committees, with agency representatives serving on appropriate university committees and faculty members serving on agency committees, e.g., a faculty member and an IPE facilitator are part of the AHSC Chronic Disease Management Committee.

- Balance our relationships and maintain open communication with the Faculty of Nursing on the Fredericton campus to ensure the continuation of our CASN accreditation and NANB program approval, and our active contribution to the MN program.
- Include representation of all health disciplines programs on the future planning for the Medical Education Program in the spirit of interprofessional education for collaborative patient-centered practice.
- Ensure that all prerequisite courses for admission to the medical education program are available to students on the UNB Saint John campus.
- Investigate the feasibility of initiating a part-time graduate program in health administration in partnership with the Faculty of Business. This might appeal to graduates across disciplines who are interested in pursuing leadership positions in health care. There may also be opportunities to introduce continuing education certificate programs to this audience.
- Develop a logic model for tracking and evaluating these initiatives for future growth of IPE on the campus. Implementation of some or all of these recommendations would satisfy the IPE project criteria of sustainability.

In conclusion

This submission describes many of the threads that make up the current matrix of relationships among the health education programs, health care delivery system, and community agencies in the Saint John area. Building on these collaborations, this submission makes specific suggestions that could strengthen these ties and increase the focus on health education, research, service and practice within the post-secondary education system of New Brunswick.