

The new interprofessional education and curriculum renewal in the Faculty of Medicine at Memorial University: A framework for success?

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Purpose: Interprofessional education (IPE) occurs when students and practitioners from two or more professions collaborate to learn from and with each other to improve patient outcomes. The Committee on Accreditation of Canadian Medical Schools recently instituted new standards requiring that the core curriculum of a medical education program include IPE. In September 2013, the Faculty of Medicine launched a curriculum renewal process which created an opportunity to reconsider the IPE activities currently available to medical students as well as to students from other professional schools. This presentation highlights the innovative curricular changes to the IPE framework that have since been implemented along with underlying rationale for those changes. Methods: This presentation describes the new IPE framework for undergraduate medical students. Included in the description is an explanation as to how curricular changes will fulfill the new accreditation standards. The curricular changes to the IPE framework emerged from student and faculty feedback, including both the strengths of the existing IPE activities and recommendations for improvement. Changes are also founded on a review of the literature on best IPE educational practices. **Results:** Overall, strengths of the existing IPE activities include positive changes in attitudes, collaboration skills, and patient safety knowledge. However, student and faculty feedback consistently indicated that students benefit most from learning activities that feature opportunities to interact with both practitioners and students from other professions in face-to-face settings, a component that was often missing. Moreover, the literature identified the importance of small interprofessional groups, interactive exercises, and reflection to maximize opportunities for collaborative learning and to advance interprofessional communication skills. Conclusions: While existing IPE activities have had some positive impact, curricular changes were required to the current IPE educational practices to better align with the medical school program to optimize collaborative learning.