

***IPE CURRICULUM:
SHARING
STRATEGIES FOR
MAPPING***

January 25, 2024

CIHC Community of Practice

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Humber College



LEARNING OBJECTIVES



By the end of this session, participants will be able to:

- Explore the benefits of engaging in IPE curriculum mapping;
- Discuss methods for IPE curriculum mapping;
- Reflect on the application of IPE curriculum mapping to their own context.





SESSION OUTLINE

Welcome and introductions

Background of curriculum mapping

Example # 1 – Humber College

Example #2 – Uni of Manitoba

Discussion

1. Does anyone have their own example they wish to share
2. What challenges have you faced with curriculum mapping and how have you addressed them (*or not*)?

Wrap-up



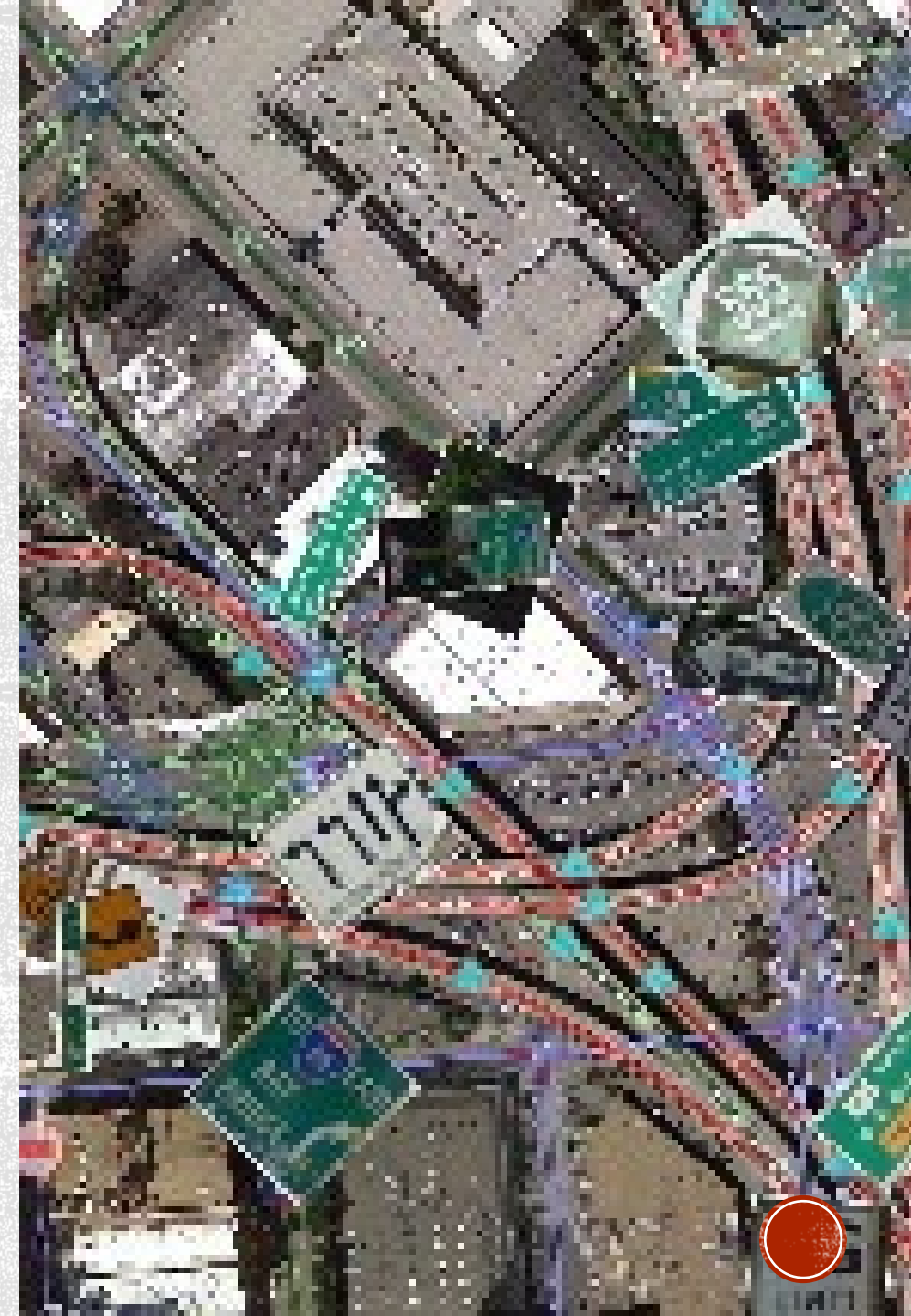
CURRICULUM MAPPING



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CURRICULUM MAPPING

- provides representation of all parts of a curriculum pathway (Joyner, 2016)
- can facilitate alignment between the operational and the planned curriculum (Joyner, 2016)
- can make transparent what, how and when it is taught and how the content is assessed (Plaza et al. 2007; Harden, 2001)



RESEARCH

Open Access

Interprofessional education-relevant accreditation standards in Canada: a comparative document analysis

Mohammad Azzam^{1*}, Anton Puvirajah¹, Marie-Andrée Girard^{2,3,4} and Ruby E. Grymonpre⁵

Abstract

Background: Increasing evidence suggests that sustainable delivery of interprofessional education (IPE) has the potential to lead to interprofessional collaborative practice (IPC), which in turn has the potential to lead to enhanced healthcare systems and improved patient-centered care health outcomes. To enhance IPE in Canada, the Accreditation of Interprofessional Health Education (AIPHE) project initiated collaborative efforts among accrediting organizations of six health professions to embed IPE language into their respective accreditation standards. To further understand the impact of the AIPHE project, this study evaluated the accountability of the IPE language currently embedded in Canadian health professions' accreditation standards documents and examined whether such language spanned the five accreditation standards domains identified in the AIPHE project.

Methods: We conducted a comparative content analysis to identify and examine IPE language within the "accountable" statements in the current accreditation standards for 11 Canadian health professions that met our eligibility criteria.

Results and discussion: A total of 77 IPE-relevant accountable statements were identified across 13 accreditation standards documents for the 11 health professions. The chiropractic, pharmacy, and physiotherapy documents represented nearly 50% (38/77) of all accountable statements. The accountable statements for pharmacy, dentistry, dietetics, and nursing (registered) spanned across three-to-four accreditation standards domains. The remaining nine professions' statements referred mostly to "Students" and "Educational program". Furthermore, the majority of accreditation standards documents failed to provide a definition of IPE, and those that did, were inconsistent across health professions.

Conclusions: It was encouraging to see frequent reference to IPE within the accreditation standards of the health professions involved in this study. The qualitative findings, however, suggest that the emphasis of these accountable statements is mainly on the students and educational program, potentially compromising the sustainability and development, implementation, and evaluation of this frequently misunderstood pedagogical approach. The findings and exemplary IPE-relevant accountable statements identified in this paper should be of interest to all relevant stakeholders including those countries, where IPE accreditation is still emerging, as a means to accelerate and strengthen achieving desired educational and health outcomes.

Keywords: Interprofessional education, Interprofessional collaborative practice, Health professions accreditation, Document analysis

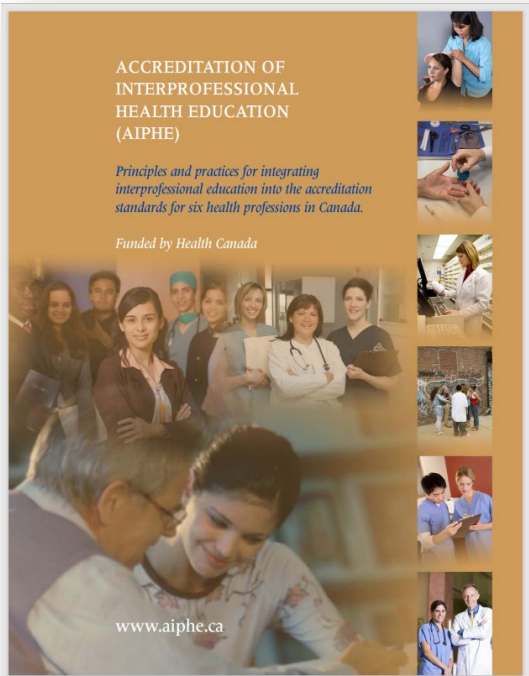
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Full list of author information is available at the end of the article



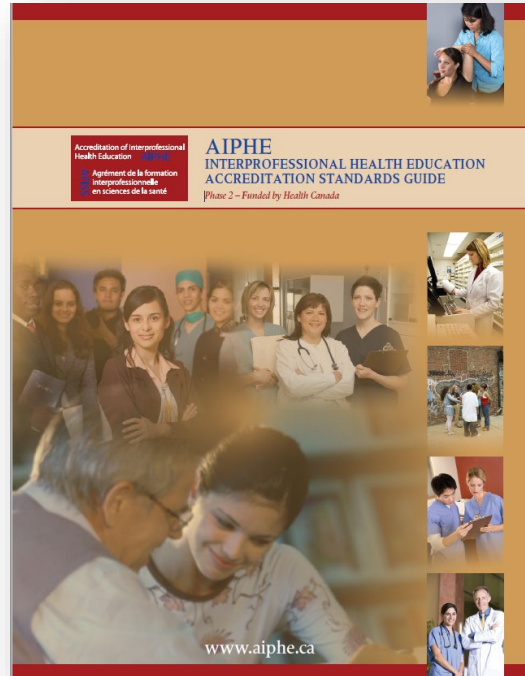
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IPE ACCREDITATION REQUIREMENTS

Azzam, M., Puvirajah, A., Girard, MA. *et al.* Interprofessional education-relevant accreditation standards in Canada: a comparative document analysis. *Hum Resour Health* **19**, 66 (2021).
<https://doi.org/10.1186/s12960-021-00611-1>



[AIPHE FinalEnglishMay6th.qxd6 \(casn.ca\)](#)



https://peac-aepc.ca/pdfs/Resources/Competency%20Profiles/AIPHE%20Interprofessional%20Health%20Education%20Accreditation%20Standards%20Guide_EN.pdf

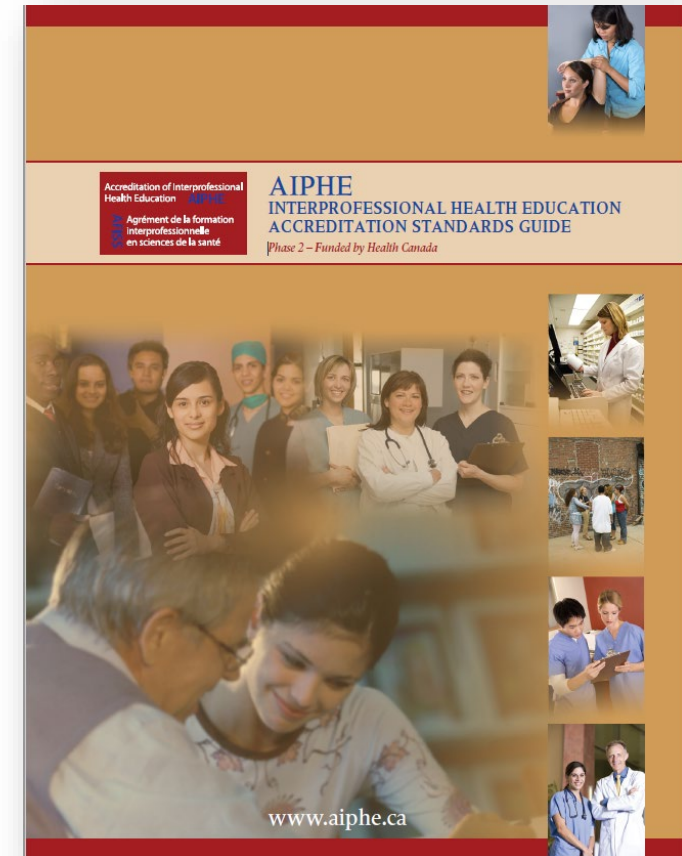


Grymonpre, R.E., Bainbridge, L., Nasmith, L. et al. Development of accreditation standards for interprofessional education: a Canadian Case Study. *Hum Resour Health* 19, 12 (2021). <https://doi.org/10.1186/s12960-020-00551-2>

IPE Accreditation Standards

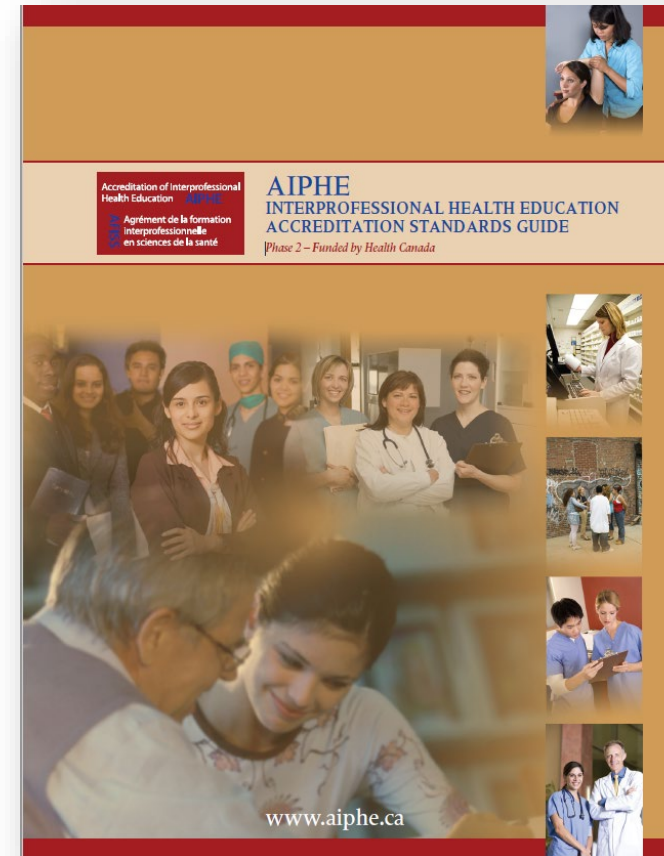
AIHPE ACCREDITATION STANDARDS

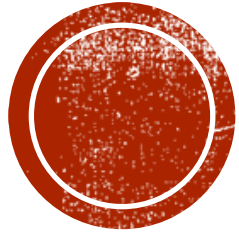
1. Organizational commitment
2. Faculty/Academic Unit
3. Students
4. Educational Program



AIHPE ACCREDITATION STANDARDS

- 1. Organizational commitment**
- 2. Faculty/Academic Unit**
- 3. Students**
- 4. Educational Program**





Example #1
Humber College
Interprofessional Education Program

IPE MAPPING

01 ABOUT HUMBER

02 HISTORY OF IPE

03 STRATEGY

04 PROCESS





HUMBER

Faculty of Health Sciences & Wellness

34 Full-Time Programs
~ 8000 Full-Time students
Range of credentials

BIOMEDICAL SCIENCES & HEALTH REGULATION

- Workplace Health and Wellness
- Biomedical Sciences
- Infection Prevention & Control
- Clinical Research
- Clinical Bioinformatics
- Health Sector Regulatory Compliance
- Regulatory Affairs
- Biotechnology

INCLUSIVE & RESPONSIVE EDUCATION

- Inclusive Resource Practice-Child and Family
- Early Childhood Education
- Community Integration through Co-operative Education

NURSING & PERSONAL SUPPORT WORKER

- Nursing
- Practical Nursing
- Personal Support Worker

EMERGENCY & FUNERAL SERVICES

- Advanced Care Paramedic
- Paramedic
- Funeral Director
- Fire Services
- Pre-Service Firefighter Education & Training
- Emergency Telecommunications
- Transfer Service Sales Representative

INTEGRATIVE & ALLIED HEALTH

- Systems Navigator
- Wellness Coaching
- Massage Therapy
- Traditional Chinese Medicine Practitioner
- Occupational Therapist Assistant & Physiotherapist Assistant
- Pharmacy Technician
- Hearing Instrument Specialist

EXERCISE & NUTRITIONAL SCIENCES

- Exercise Science & Lifestyle Management
- Fitness & Health Promotion
- Food & Nutrition Management
- Nutrition & Healthy Lifestyle Promotion

HISTORY



LARGE EVENTS



RESOURCES
LOGISTICS



OUTSIDE OF
CURRICULUM

STRATEGY

PROGRAM COORDINATOR FOR IPE
HIRED FALL 2019



STRATEGY

“Go slow to go fast!”

Dr. John Gilbert



STRATEGY

2019

2020

2021

2023

NEEDS
ASSESSMENT

IPE FRAMEWORK
DEVELOPMENT

IDEAL FUTURE
MAPPING

CURRICULUM
MAPPING

NEEDS ASSESSMENT

Past & Current IPE

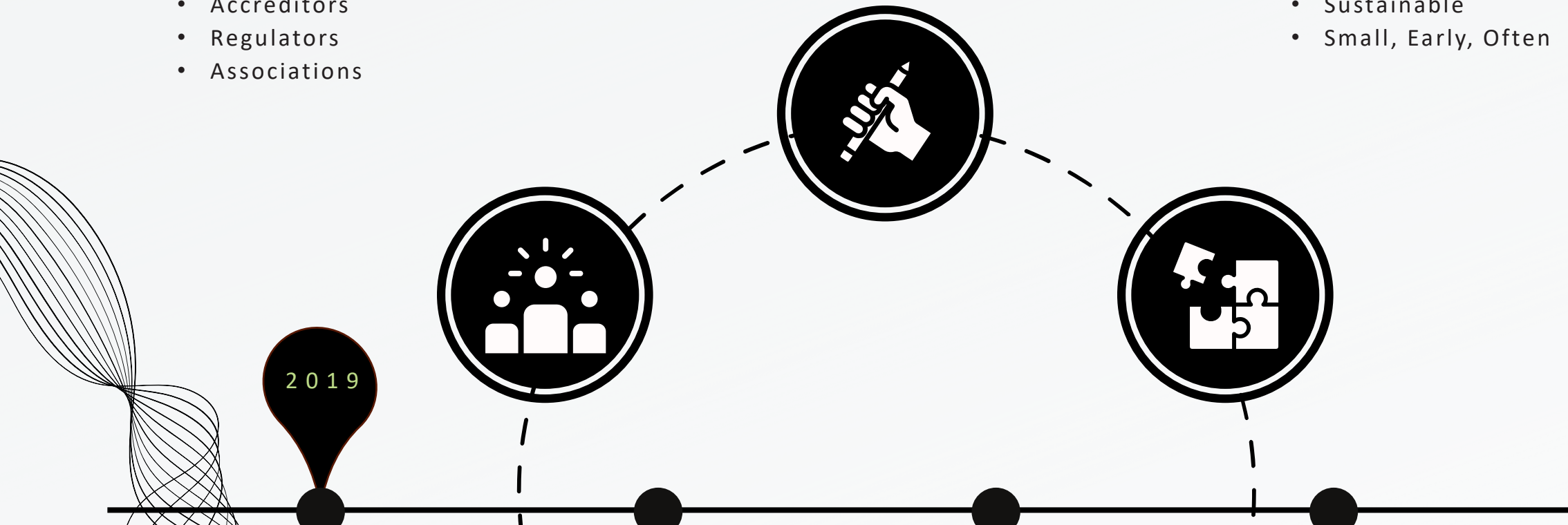
- Co-Curricular
- Curricular
- Accreditors
- Regulators
- Associations

Faculty IPE KSAs

- Support of IPE/IPCP
- Varied knowledge & experience

Principles

- Decisions driven by the program
- Sustainable
- Small, Early, Often



IPE COMPETENCY FRAMEWORK DEVELOPMENT



Co-create shared, scaffolded learning for each competency.



Team of faculty from across the FHSW



2020

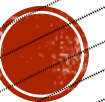
2019

IPE COMPETENCY FRAMEWORK

	Foundational	Developmental	Proficient
Competency A	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome
Competency B	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome
Competency C	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome
Competency D	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome
Competency E	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome	<ul style="list-style-type: none">• Learning Outcome• Learning Outcome• Learning Outcome

2019

2020



IDEAL FUTURE MAPPING

Map of FHSW IPE learning outcomes to program learning outcomes

Program: _____
 Name(s) of individual(s) contributing to the map: _____

Colour legend for each learning outcome

Learning outcome should be achieved by graduates of this program
LO not applicable or not achievable within the time of the program

Example: For an ...
 Terminology: For the ...

Competency	Foundational	Developmental	Proficient
Interprofessional Team Functioning	Describe the process of interprofessional team development and the practices of effective teams. Discuss common situations that may lead to disagreements or conflicts, including role ambiguity, power gradients and differences in goals. Identify instances where interprofessional collaboration improves client outcomes.	Use evidence-informed strategies when forming and working within interprofessional teams to ensure optimal team functioning. Regularly reflect on interprofessional team functioning and engage in professional development to enhance the team's ability to collaborate. Apply evidence-based leadership practices that support collaboration and team effectiveness.	Integrate the knowledge and experience of the client and multiple professionals in shared client-centred problem-solving. Invite those with differing views to address and resolve disagreements and foster consensus, allowing all members to feel their viewpoints have been heard. Co-create a climate for shared leadership and collaboration.
Roles & Responsibilities for Interprofessional Collaboration	Define role clarity and describe why it is vital for interprofessional collaborative practice. Recognize one's own professional limitations in skills, knowledge, and abilities.	Demonstrate role clarification by recognizing and respecting the diversity of other professions. Differentiate one's own professional role, responsibilities, values and scope of practice from other professionals. Apply role clarification by describing the roles, responsibilities and scopes of practice of other professions and involving other professions in client care appropriate to their roles and responsibilities.	Negotiate roles and responsibilities in a respectful and responsible way. Evaluate how one's uniqueness (experience, level of expertise, culture, power, hierarchy within the team) contributes to effective communication, conflict management, and positive interprofessional working relationships. Act to expand their interprofessional network by cultivating professional relationships within the health system to improve client care and advance learning.
Interprofessional Communication	Describe common communication barriers between interprofessional team members. Identify verbal, non-verbal and written evidence-based communication strategies, tools or frameworks to ensure effective interprofessional communication. Discuss the meaning of respectful language and non-verbal communication in interprofessional collaborative practice.	Apply interprofessional communication strategies and tools to ensure a common understanding between interprofessional team members. Use universally understood terminology in written and verbal communication to convey accurate, relevant information to members of an interprofessional team. Communicate in a manner that ensures equal representation, demonstrates trust and maintains mutual respect during interprofessional conflict and decision making. Follow confidentiality procedures when communicating about a client with other members of an interprofessional team. Communicate with clients in a clear, respectful manner to enable their full participation in decision-making.	Assess comprehension of information by the client and interprofessional team members to ensure accurate understanding of information, recommendations or decision. Evaluate behaviours that demonstrate respect and professionalism during challenging conversations or situations. Evaluate interprofessional team communication to reflect, provide feedback and contribute to improved communication. Design a plan to increase interprofessional communication.
Critical Reflection & Innovation	Discuss strategies and techniques that utilize self-awareness and self-regulation to cope with personal and professional challenges. Explain the importance of creativity in analyzing challenges and proposing solutions within a system. Provide examples of connections across multiple systems when explaining the need for competence in interprofessional collaboration.	Analyze the impact of resilience in building and sustaining robust health systems. Analyze one's own interprofessional competence to determine personal impact on current and future health systems. Create a plan, with stakeholders, to address specific challenges within a health system to improve client outcomes or system functioning.	Evaluate current wellness practices and promote strategies to improve the resilience of self, clients and colleagues. Implement a plan, with stakeholders, to address a specific challenge experienced within a health system to improve client outcomes or system functioning.
Ethical Interprofessional Practice	Discuss common ethical practices and standards followed by all members of an interprofessional team. Discuss the importance of maintaining ethical practices within an interprofessional team. Identify societal and institutional factors that affect a client's overall health and wellness.	Examine the impact of personal integrity and professional ethics on decision-making within interprofessional collaborative practice. Debate the decision-making process when personal and professional values contrast with the client's values. Compare the impact of differing experiences, values, perspectives and behaviours on decision-making. Create an environment of respect that appreciates the unique cultures, values, responsibilities and expertise of other professions.	Act following professional ethics when supporting the client, communicating with interprofessional team members and making decisions. Act with the best interests of the client when facing ethical dilemmas within the interprofessional team. Evaluate current health system practices and policies to improve access, opportunity and equity for members of marginalized groups.

Competencies

2019

2020

2021



IDEAL FUTURE MAPPING

Competencies

Map of FHSW IPE learning outcomes to program learning outcomes

Program: Massage Therapy
 Name(s) of individual: Felicia Calleri & Amanda Baskwill

Colour legend for each learning outcome:
 Learning outcome should be achieved by graduates of this program
 LO not applicable or not achievable within the time of the program

Example: For an Terminology: Fo

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2021

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IDEAL FUTURE MAPPING

Competencies

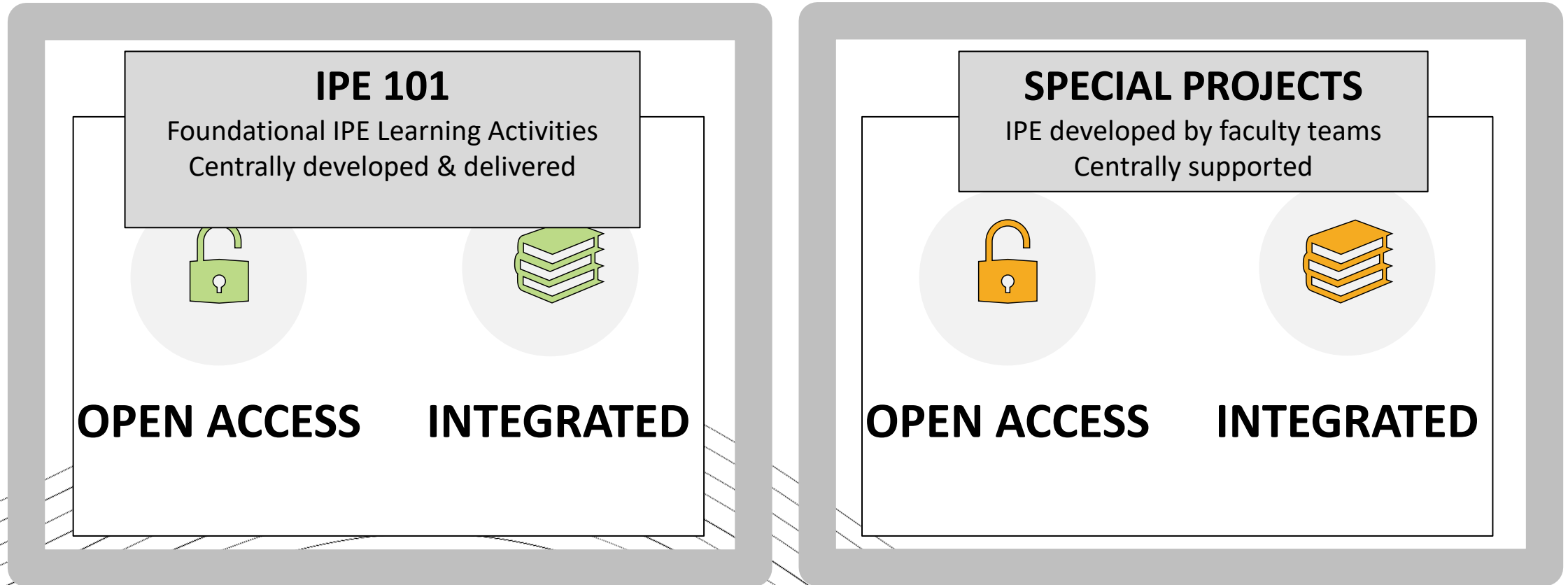
Program	EMTC		
Name(s) of individual	Gord Gilmore		
Colour legend for each learning outcome			
	Learning outcome should be achieved by graduates of this program		
	LO not applicable or not achievable within the time of the program		
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Competency			
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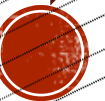
IPE DELIVERY MODEL



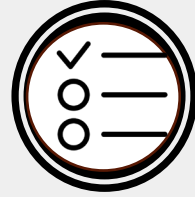
2019

2020

2023



CURRICULUM MAPPING



1. Identify IPE in curriculum
2. Identify IPE outside of curriculum
3. Reflect on its integration into curriculum
4. Reflect on current gaps vs. ideal future



Geneviève Mailloux

2019

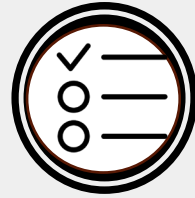
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2021

2023



CURRICULUM MAPPING



1. Identify IPE in curriculum
2. Identify IPE outside of curriculum
3. Reflect on its integration into curriculum
4. Reflect on current gaps vs. ideal future

2023 - 2024 IPE Competency Map

PROGRAM NAME

Color Code	Level	Educational Setting	
Yellow	Foundational	C	Classroom
Green	Developmental	L	Lab
Blue	Proficient	F	Field

Color Code	Learning outcome
Light Green	Desired, not yet in curriculum
Light Blue	Embedded in curriculum

Competency 1:

Interprofessional Team Functioning

Foundational Learning Outcomes

- 1.F.1 Describe the process of interprofessional team development and the practices of effective teams.
- 1.F.2 Discuss common situations that may lead to disagreements or conflicts, including, role ambiguity, power gradients and differences in goals.
- 1.F.3 Identify instances where interprofessional collaboration improves client outcomes.

Developmental Learning Outcomes

- 1.D.1 Use evidence-informed strategies when forming and working within interprofessional teams to ensure optimal team functioning.
- 1.D.2 Regularly reflect on interprofessional team functioning and engage in professional development to enhance the team's ability to collaborate.
- 1.D.3 Apply evidence-informed leadership practices that support collaboration and team effectiveness.

Proficient Learning Outcomes

- 1.P.1 Integrate the knowledge and experience of the client and multiple professionals in shared client-centred problem-solving.

		SEM 1				SEM 2			
Competency 1:									
Interprofessional Team Functioning									
Foundational Learning Outcomes									
1.F.1	Describe the process of interprofessional team development and the practices of effective teams.								
1.F.2	Discuss common situations that may lead to disagreements or conflicts, including, role ambiguity, power gradients and differences in goals.								
1.F.3	Identify instances where interprofessional collaboration improves client outcomes.								
Developmental Learning Outcomes									
1.D.1	Use evidence-informed strategies when forming and working within interprofessional teams to ensure optimal team functioning.								
1.D.2	Regularly reflect on interprofessional team functioning and engage in professional development to enhance the team's ability to collaborate.								
1.D.3	Apply evidence-informed leadership practices that support collaboration and team effectiveness.								
Proficient Learning Outcomes									
1.P.1	Integrate the knowledge and experience of the client and multiple professionals in shared client-centred problem-solving.								

2023

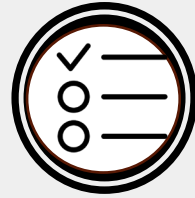
2019

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2021



CURRICULUM MAPPING



1. Identify IPE in curriculum

2. Identify IPE outside of curriculum
3. Reflect on its integration into curriculum
4. Reflect on current gaps vs. ideal future

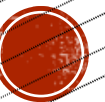
Color Code	Learning outcome	SEM 1			
	Desired, not yet in curriculum				
	Embedded in curriculum				
		Anatomy 1 ANAT 101	Clinical Skills and Techniques 1 MSTH 104	Professional Identity and Responsibility MSTH 106	Clinical Assessment 1
Developmental Learning Outcomes					
2.D.1	Demonstrate role clarification by recognizing and respecting the diversity of other professions.			C	
2.D.2	Differentiate one's own professional role, responsibilities, values and scope of practice from other professionals.			C	
2.D.3	Apply role clarification by describing the roles, responsibilities and scopes of practice of other professions and involving other professions in client care appropriate to their roles and responsibilities.				

2023

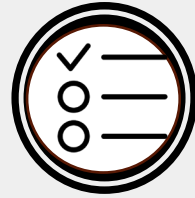
2019

2020

2021



CURRICULUM MAPPING



1. Identify IPE in curriculum

2. Identify IPE outside of curriculum
3. Reflect on its integration into curriculum
4. Reflect on current gaps vs. ideal future

Color Code		Learning outcome		MAY/JU NE	SEM 5						SEM 6					
		Desired, not yet in curriculum														
		Embedded in curriculum														
				General Elective (GNED)	TCM258: Clinical Internship 2	TCM251: TCM Internal Medicine 2	TCM303: OTCs and NHPs	TCM304: Health Assessment	TCM305: Clinical Placement 2	TCM306: CMT Dermatology	General Elective (GNED)	TCM350: TCM Gynaecology	TCM351: TCM Paediatrics and Gerontology	TCM353: Research Methods and Biological Statistics	TCM355: Clinical Placement 3	TCM357: Integrated Theory and Therapeutics
2.D.1	Demonstrate role clarification by recognizing and respecting the diversity of other professions.								C						C	
2.D.2	Differentiate one's own professional role, responsibilities, values and scope of practice from other professionals.								C						C	
2.D.3	Apply role clarification by describing the roles, responsibilities and scopes of practice of other professions and involving other professions in client care appropriate to their roles and responsibilities.								C						C	
Proficient Learning Outcomes																
2.P.1	Negotiate roles and responsibilities in a respectful and responsible way.								C						F	
2.P.2	Evaluate how one's uniqueness (experience, level of expertise, culture, power, hierarchy within the team) contributes to effective communication, conflict management, and positive interprofessional working relationships.								C						C	

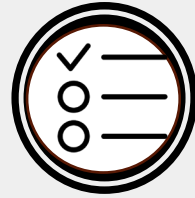
2023

2019

2020

2021

CURRICULUM MAPPING



1. Identify IPE in curriculum
2. **Identify IPE outside of curriculum**
3. Reflect on its integration into curriculum
4. Reflect on current gaps vs. ideal future

IPE Learning Activities	IPE Learning Outcomes	Programs Currently Involved	Other Relevant Programs	Which course(s) could include this IPE Learning Activity?

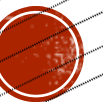


2019

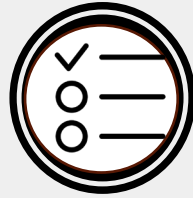
2020

2021

2023



CURRICULUM MAPPING



1. Identify IPE in curriculum
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IPE Learning Activities	IPE Learning Outcomes	Programs Currently Involved	Other Relevant Programs	Which course(s) could include this IPE Learning Activity?

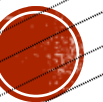


2019

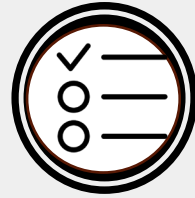
2020

2021

2023

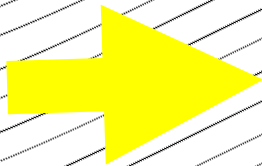


CURRICULUM MAPPING



1. Identify IPE in curriculum
2. Identify IPE outside of curriculum
3. Reflect on its integration into curriculum
4. **Reflect on current gaps vs. ideal future**

		Anatomy 1 ANAT 101	Clinical Skills and Techniques 1 MSTH 104	Professional Identity and Responsibility MSTH 106	Clinical Assessment 1
	Color Code				
	Learning outcome				
		Desired, not yet in curriculum			
		Embedded in curriculum			
Developmental Learning Outcomes					
2.D.1	Demonstrate role clarification by recognizing and respecting the diversity of other professions.			C	
2.D.2	Differentiate one's own professional role, responsibilities, values and scope of practice from other professionals.			C	
2.D.3	Apply role clarification by describing the roles, responsibilities and scopes of practice of other professions and involving other professions in client care appropriate to their roles and responsibilities.				



2019

2020

2021

2023



STRATEGY

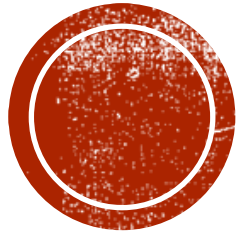
“Go slow to go fast!”

Dr. John Gilbert



STRATEGY





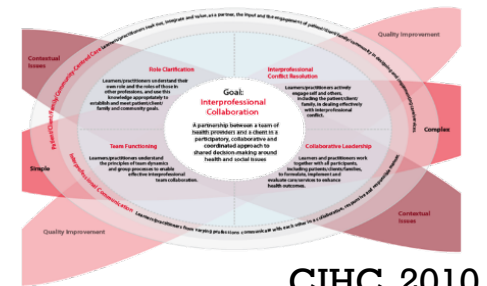
Example #2

University of Manitoba

Office of Interprofessional Collaboration

Acknowledgements

- History of “one-off” opportunities since 2006
- OIPC established in 2015
 - Representatives from 5 Colleges: Dent, Med, Nurs, Pharm, Rehab Sci
 - 10 programs across 4 campuses: Dent, DH, Med, Midwifery, Nurs, OT, PA, Pharm, PT, RT
 - ~635 new students every fall
- IPC curriculum
 - Grounded in 6 competencies for collaboration (CIHC, 2010) & contact theory
 - Focus on early learners in years 1 & 2 of professional programs
 - Intended to compliment other IP opportunities



CIHC, 2010

BACKGROUND OF IPE AT THE UNIVERSITY OF MANITOBA



- History of “one-off” opportunities since 2006
- OIPC established in 2015
 - Representatives from 5 Colleges: Dent, Med, Nurs, Pharm, Rehab Sci
 - 10 programs across 4 campuses: Dent, Dent, Dent, Dent, Dent, Dent, Dent, Dent, Dent, Dent



Challenge: How does a faculty keep track of multiple simultaneous evolving IPE learning opportunities?

CIHC (2010) &

Focus on early learners in years 1 & 2 of professional programs

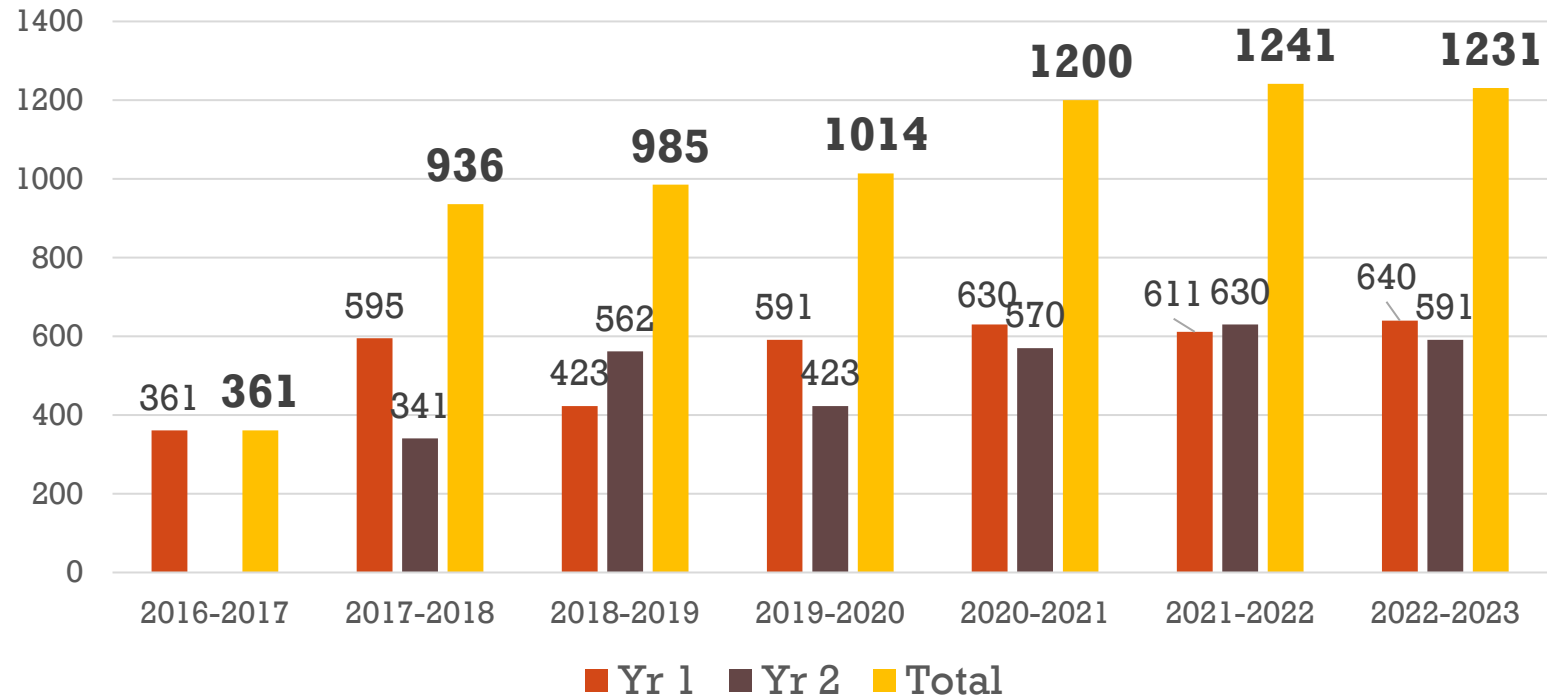
- Intended to compliment other IP opportunities



CIHC, 2010

BACKGROUND OF IPE AT THE UNIVERSITY OF MANITOBA





3,117 will have completed the curriculum by spring 2023

STUDENT ENROLLMENT 2016-2023






PURPOSE

To develop a mechanism to track all the IPE activities in the Rady Faculty of Health Sciences, that will meet the needs of IPE educators and accreditation staff alike.

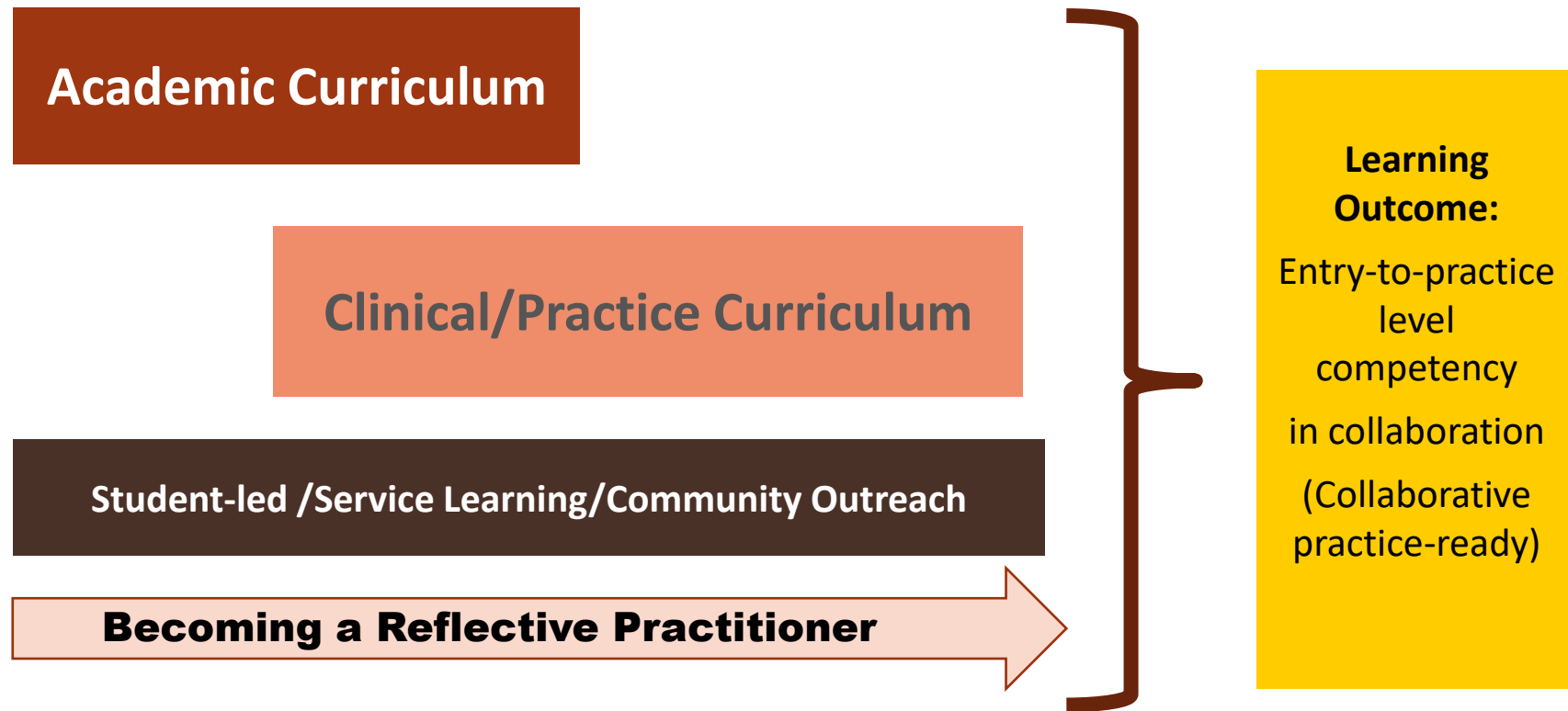




**RESULTS
SHOULD...**

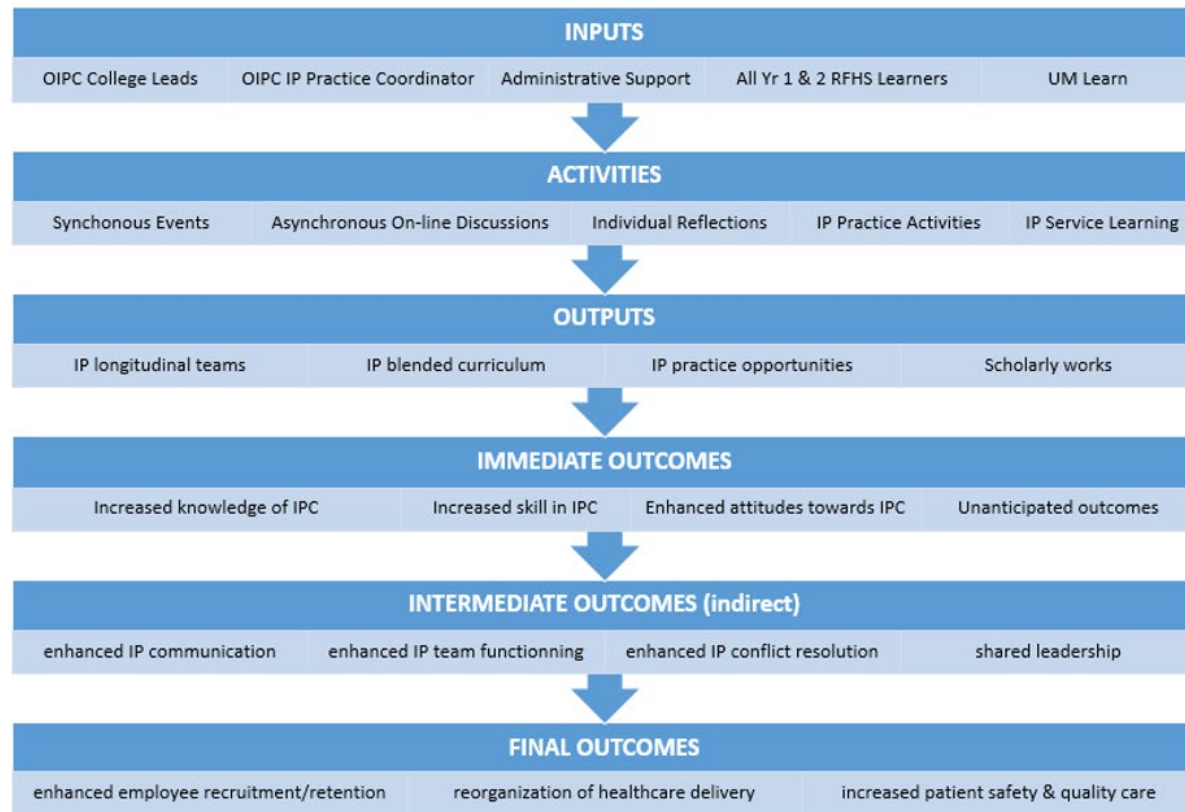
- **Showcase all IPE activities across the faculty**
- **Enable identification of curricular gaps in IPE**
- **Reduce duplication of work**
- **Provide a template for other complex learning activities common across the faculty**

IPCC CURRICULUM MAP 1.0



IPCC CURRICULUM MAP 2.0 V1

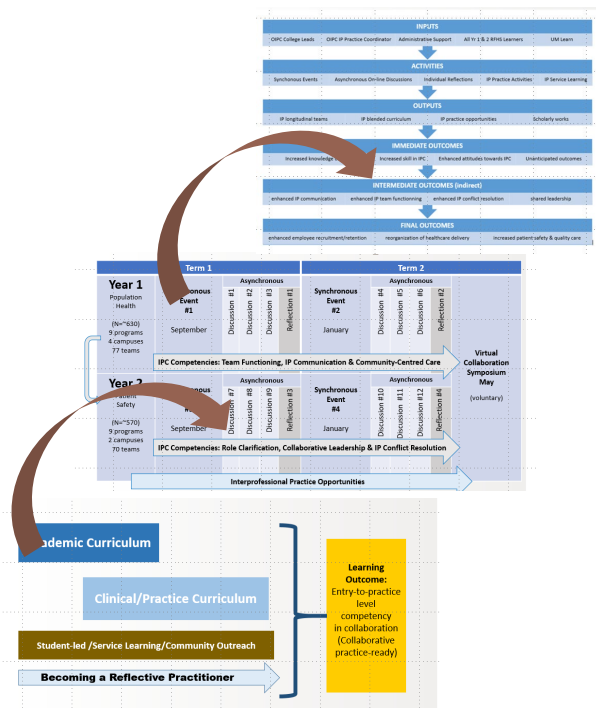
PROGRAM LOGIC MODEL



IPCC CURRICULUM MAP 2.0 V2

		Term 1				Term 2					
Year 1 Population Health (N=~630) 9 programs 4 campuses 77 teams	Synchronous Event #1 September	Asynchronous				Synchronous Event #2 January	Asynchronous				Virtual Laboration Symposium May (voluntary)
		Discussion #1	Discussion #2	Discussion #3	Reflection #1		Discussion #4	Discussion #5	Discussion #6	Reflection #2	
IPC Competencies: Team Functioning, IP Communication & Community-Centred Care											Virtual Laboration Symposium May (voluntary)
Year 2 Patient Safety (N=~570) 9 programs 2 campuses 70 teams	Synchronous Event #3 September	Asynchronous				Synchronous Event #4 January	Asynchronous				
		Discussion #7	Discussion #8	Discussion #9	Reflection #3		Discussion #10	Discussion #11	Discussion #12	Reflection #4	
IPC Competencies: Role Clarification, Collaborative Leadership & IP Conflict Resolution											
Interprofessional Practice Opportunities											





Macro

Year I Tables: Learning Outcome and Learning Objectives by Learning Encounter

The 'X' indicates a focus of that learning encounter. Once introduced, students continue to build upon their skills and ability with respect to that learning objective throughout the rest of the curriculum.

Table 1: Year I, Term I Learning Outcome and Learning Objectives by Learning Encounter

Term Learning Outcome I: Team Communication					
By the end of Term I, students in their assigned IPCC team will begin to engage in collaborative communication in a responsive and responsible manner.					
Learning Objectives	Face to Face 1	Discus'n 1	Discus'n 2	Discus'n 3	Reflec'n 1
1. Consider team member's viewpoints, gathering input from team members to develop a common understanding of individual's ideas.				X	
2. Demonstrate active listening and/or engagement to build trusting and respectful relationships.	X				
3. Describe team behaviors supportive of effective team communication.					X
Term Learning Outcome II: Team Function					
By the end of Term I, students in their assigned IPCC teams will have "formed" (Tuckman, 1965) as an IPCC team.					
Learning Objective	Face to Face 1	Discus'n 1	Discus'n 2	Discus'n 3	Reflec'n 1
1. Discuss enhancers and challengers to being part of a functioning team.		X			
2. Engage in group process as integral to interprofessional collaborative team function, specifically:	X				
a. Describe group process.					
b. Assess group process phase on a regular basis.				X	
c. Reflect upon benefits and challenges of being part of an interprofessional collaborative team.					X
3. Contribute to interprofessional collaborative team function as follows:					
a. Explore individual and group characteristics (strengths and challenges) to enhance team function.			X		X
1. Establish goals and expectations for team function.				X	

Micro

MAPPING...MACRO TO MICRO...IT'S IN THE DETAILS...



OIPC IPE MAPPING PROJECT



Criteria

- iterative “living” resource for sharing curriculum across multiple programs
- pragmatic and collaborative in its development and implementation
- facilitate communication processes, while reducing duplication of work
- contribute to accreditation in a meaningful, authentic, and responsive way
- provide a template for other complex longitudinal curricula





**IPE RFHS
MAPPING
DEVELOPMENT**

Partner Consultation

OIPC College leads

Dentistry and Dental Hygiene

Medicine

Pharmacy

Nursing

OIPC Practice Coordinator

IPE Department Leads, College of Rehabilitation
Sciences

Faculty-wide Integrated Accreditation Unit

Curriculum mapping expert



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IPE RFHS MAPPING DEVELOPMENT



Considerations

- Amount of detail
- Embedded links
- Filtering options
- Accessibility of software (cost and ease of use)

Options

- Excel
- MS Word
- e-LMS
- SmartArt



IPE RFHS MAPPING DETAILS

Categories

- **Learners** - year of program, term, course #
- **Session** - title, topic, learning objectives
- **Collaboration Competency** (CIHC, 2010)
 - Role Clarification
 - Team Functioning
 - IP Communication
 - IP Conflict Resolution
 - Collaborative Leadership
 - Patient/Client/Family/ Community-centred Care
- **Learning Strategy** - lecture, tutorial, on-line discussion, simulation, experiential learning
- **Learning Continuum** - novice / beginner, functional, competent, proficient/skilled, expert



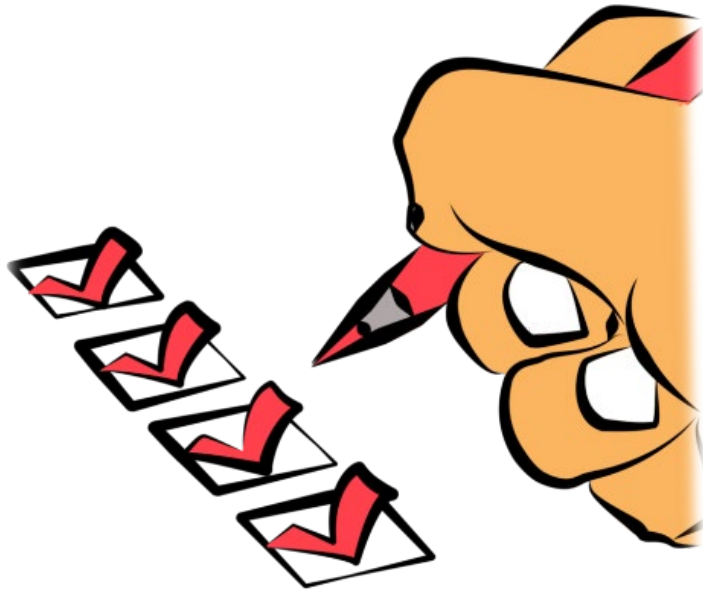
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IPE RFHS MAPPING DETAILS

Categories cont'd

- **Competency Target** (Charles, et al., 2010)
 - Exposure / Awareness
 - Immersion / Application
 - Competence / Integration
 - Mastery
- **IPE Educational Outcomes** (Adapted by Barr et al., 2000 from Kirkpatrick, 1967)
 - Level 1: Learners' reaction to experience
 - Level 2a: Modification of perceptions & attitudes
 - Level 2b: Acquisition of knowledge & skills
 - Level 3: Behavioural change
 - Level 4a: Change in organizational practice
 - Level 4b: Benefits to patients/clients



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IPE RFHS MAPPING DETAILS



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Categories cont'd

- **Learning Domains** (Bloom, 1956)
 - Cognitive (“know”)
 - Psychomotor (“do”)
 - Affective (“be”)
- **Assessment Strategy**
 - Participation Observation
 - Survey Record of discussion
 - Reflection Test / exam
 - OSCE Practice assessment
- **PIPES Rating** (U of T, 2013/2019)
 - Process (“how”): 4 items
 - Content (“what”): 4 items
 - Score of 0, 5 or 10
 - Red:** 30-45 points
 - Orange:** 50 – 60 points
 - Green:** >60 points

https://ipe.utoronto.ca/sites/default/files/2019-11-18-PIPES%20Application%20Form%20-%20final_0.pdf



RFHS IPE MAP

FILE **HOME** INSERT PAGE LAYOUT FORMULAS DATA REVIEW VIEW

Clipboard: Paste, Cut, Copy, Format Painter
Font: Calibri, 11, Bold, Italic, Underline, Text Color, Background Color
Alignment: Wrap Text, Merge & Center
Number: General, Currency, Percentage, Decimals, Thousands Separator
Styles: Conditional Formatting, Format as Table, Cell Styles
Cells: Insert, Delete, Format
Editing: AutoSum, Fill, Clear, Sort & Find & Filter, Select

A23

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R
1	Purpose of this tool																	
2	This spreadsheet is intended to track interprofessional education activities across the Rady Faculty of Health Sciences' nine participating health professional programs.																	
3	It is a living document and is meant to be updated regularly and shared broadly.																	
4																		
5	Worksheets																	
6	Individual worksheets have been created for the nine Rady Faculty health professional programs participating in IPE activities.																	
7	Additional worksheets include the Accreditation Standards for IPE for all nine participating programs; the core competencies relevant to interprofessional collaboration; the University of Toronto's PIPES r																	
8	When entering new curriculum, enter each learnign objective on a separate line.																	
9																		
10	Search Function																	
11	IPE activities delivered by the OIPC can be searched under the OIPC tab; additional IPE activities for each program can be located under the relevant program tab.																	
12	Using the data filtering feature in Excel, each activity can be filtered by learners, year of study, term, topic, learning objectives, and collaboration competency.																	
13	Additional data features include learning strategy, learning continuum, educational outcomes, learning domain, method of assessment and PIPES rating.																	
14																		
15	Data Renewal																	
16	It is requested that any errors and or updates identified be reported to the Office of Interprofessional Collaboration, who will be repsonible for the regular upkeep of this worksheet.																	
17	Updated files will be shared annually with the Rady Faculty Accreditation Unit and are freely available upon request.																	
18	oipc@umanitoba.ca																	
19																		
20	Version May 17, 2021																	
21																		
22																		

READY | **Read-Me First** | Accreditation Standards for IPE | Core Competencies | Tables | PIPES Rating | OIPC | Dental Hygiene | Dentistry | Medicine | Nursing | OT | PA | Pharmac... | 100%



RFHS IPE MAP

	A	B	C	D	E
5	nursing	College of Registered Nurses of Manitoba (2018)	Standard II: CURRICULUM The nursing education program provides a curriculum through its content and method of delivery that ensures students receive the theoretical, laboratory and clinical practice experiences required to meet the applicable standards and competencies.	b) The program provides a curriculum that reflects current best practice in: health and health promotion, legal and ethical considerations, diversity in client populations, interprofessional collaboration , health needs of marginalized populations in Manitoba, evidence informed nursing practice, education and research, health service delivery, technology, and client safety.	
6	OT	Canadian Association of Occupational Therapists (2011)	2.3 The educational conceptual framework is based on current and emerging educational practice including interprofessional education .	2.5 The professional conceptual framework is based on current and emerging occupation-based occupational therapy theory and practice including interprofessional practice .	2.713 The academic and fieldwork education components incorporate interprofessional education and practice .
7	Physician Assistant	Physician Assistant Certification Council of Canada (PACCC)			
8	pharmacy	Canadian Council for Accreditation of Pharmacy Programs (2018)	Part I: Academic Program C. Curriculum Standard 3: The professional degree program in pharmacy has a minimum of four academic years, or the equivalent number of hours or credits, including a series of core courses, practice experiences and interprofessional experiences that support educational outcomes.	Part I: Academic Program C. Curriculum Standard 4: The curriculum includes foundational content in: biomedical, pharmaceutical, behavioural, social, and administrative pharmacy sciences; clinical sciences including clinical practice skills; practice experiences; and intra- and interprofessional collaborative practice skills . The curriculum addresses outcomes and competencies to develop graduates that are capable of carrying out care provider, communicator, collaborator, leader-manager, health advocate, scholar and professional roles.	Part I: Academic Program C. Curriculum Standard 6: The curriculum includes required intra- and interprofessional learning experiences, offered throughout the professional program, to enable a graduate to provide patient care as a collaborative member of a care team.
9	PT	Physiotherapy Education Accreditation Canada (2012)	ROLE 6.3 COLLABORATION The program prepares students for collaborative practice to support quality client-centered care .	6.3.1 Establish and maintain interprofessional relationships , which foster effective collaborative practice .	6.3.2 Prevent, manage, and resolve conflict related to client-centered care.
10	RT	Canadian Society of Respiratory Therapists			

Accreditation Standards for IPE

Core Competencies

Tables

PIPES Rating

OIPC

Dental Hygiene

Dentistry

Medicine

Nursing

OT

PA

Pharmacy

PT

RT

Cc ...



RFHS IPE MAP

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A9 :

	A	B	C	D	E	F	G	H	I	J
dentistry		Association of Faculties of Dentistry https://acfd.ca/about-acfd/publications/	Competency 3 (Communicator and Collaborator): The effective facilitation, both individually and as part of a healthcare team, of the dentist-patient relationship and the dynamic exchanges that occur before, during and after a patient interaction.	3.3 Engage patients and others in developing plans that reflect the patient's dental health care needs and goals.	3.4 Document and share written and electronic information about the dental encounter to optimize clinical decision-making, patient safety, confidentiality, and privacy.	3.5 Work effectively with other dentists and other health care professionals.	3.6 Work with dentists and other colleagues in the health care professions to promote understanding, manage differences, and resolve conflicts.	3.7 Hand over the care of a patient to another health care professional to facilitate continuity of safe patient care		
3 medicine		CanMEDs Core Competency Framework (2015) http://canmeds.royalcollege.ca/uploads/tenframe-work/CanMEDS%202015%20Framework_EN_Fred.uceed.pdf	Collaborator: As Collaborators, physicians work effectively with other health care professionals to provide safe, high-quality, patient-centred care.	1 Work effectively with physicians and other colleagues in the health care professions	2. Work with physicians and other colleagues in the health care professions to promote understanding, manage differences, and resolve conflicts	3. Hand over the care of a patient to another health care professional to facilitate continuity of safe patient care				
4 nursing		Entry-Level Competencies (ELCs) for the Practice of Registered Nurses (2019)	4. Collaborator Registered nurses are collaborators who play an integral role in the health care team partnership. (* denotes critical role)	4.1* Demonstrates collaborative professional relationships.	4.2 Initiates collaboration to support care planning and safe, continuous transitions from one health care facility to another, or to residential, community or home and self-care.	4.3 Determines their own professional and interprofessional role within the team by considering the roles, responsibilities, and the scope of practice of others.	4.4 Applies knowledge about the scopes of practice of each regulated nursing designation to strengthen intraprofessional collaboration that enhances contributions to client health and well-being.	4.5* Contributes to health care team functioning by applying group communication theory, principles, and group process skills.		
5 OT		Profile of Practice of Occupational Therapists in Canada (2012)	3 Collaborator	3.1 Work effectively in interprofessional and intraprofessional teams.	3.2 Effectively work with a team to manage and resolve conflict.					
6 Physician Assistant										
7 pharmacy										
8 PT		Competency Profile for PTs in Canada (2017)	Domain 3 Collaboration As collaborators, physiotherapists work effectively with others to provide inter- and intraprofessional care.	3.1 Promote an integrated approach to client services.	3.2 Facilitate collaborative relationships.	3.3 Contribute to effective teamwork.	3.4 Contribute to conflict resolution.			
9 RT		NATIONAL COMPETENCY FRAMEWORK for	B3 Collaborate in the interprofessional health	B3.1 Collaborate in professional consultation						

Page 1 Page 2 Page 3

Accreditation Standards for IPE Core Competencies Tables PIPES Rating OIPC Dental Hygiene Dentistry Medicine Nursing OT PA Pharmacy PT RT Cc ...

READY 70%



RFHS IPE MAP

University of Toronto, 2013													
Points													
0	5	10	Score										
A. PROCESS (How)													
P1 - Level of IP Interactivity	Didactic	Discussion	Interactive	5	10								
P2 - Number of professions with IPE educated facilitators	1	2	>2	10	5								
P3 - Number of professions represented in student participants	<3	3	>3	10	5								
P4 - Frequency of interactions across the learning activity	1	2	>3	0	0								
PROCESS SUBTOTAL				25	20								
B. CONTENT (What)													
C1 - Realistic and authentic IP learning activity (performance-based)	See/hear	Talk/Dialogue	Do/ Real Life	5	10								
C2 - Explicit IPE learning outcomes - number of IPE constructs	1	2	3	5	10								
C3 - Debrief period with students and facilitators after IPE learning activity	None	Informal debrief: reflection focusing on content	Facilitated debrief: reflection focusing on content and process (guidelines provided)	5	10								
C4 - Case-based learning	No cases	Case presentation with some application (adjunct to learning activity)	Dedicated case presentation and in- depth dialogue (primary focus of learning activity)	10	0								
CONTENT SUBTOTAL				25	30								
TOTAL LEARNING ACTIVITY POINTS				50	50								
NOTE: To be incorporated into the IPE curriculum, each learning activity must have two process and two content criteria. In addition, a minimum of 15 process, 10 content and 30 points overall must be accrued.													
Learning Categories: Red: 30-45 points Orange: 50 – 60 points Green: >60 points													

PIPES Rating



RFHS IPE MAP

A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q
Learner	Year of Pr	Term	Course	Session Title	Topic	Session Learning Objectives	Collaboration Comp	Learning Strate	Learning Contin	Competency Targ	Educational	Learning Doi	Assessment	PIPES	Accred Std	Accr
All RFHS	1	fall	OIPC	F2F #1: IPC & Community Engagement	IPC and Population Health	Exploring the social determinants of health within community population health initiatives, learners will be able to: 1. Describe group process as integral to interprofessional collaborative	Team Functioning	tutorial	Novice / Beginner	Exposure / Awareness	Level 2a: Modification of perceptions & attitudes	Cognitive	record of discussio	75	Accreditation Standards for IPE/IC2	Accre Stand IPE/IC
All RFHS	1	fall	OIPC	F2F #1: IPC & Community Engagement	IPC and Population Health	Exploring the social determinants of health within community population health initiatives, learners will be able to: 2. Demonstrate active listening and/or engagement to build trusting	IP Communication	tutorial	Novice / Beginner	Exposure / Awareness	Level 3: Behavioural change	Psychomotor	record of discussio	75	Accre Stand IPE/IC	
All RFHS	1	fall	OIPC	F2F #1: IPC & Community Engagement	IPC and Population Health	Exploring the social determinants of health within community population health initiatives, learners will be able to: 3. Listen to patient/client/family/community lived experiences and	Patient/client/familycommu	tutorial	Novice / Beginner	Exposure / Awareness	Level 1: Learners' reaction to experience	Affective	reflection	75		
All RFHS	1	fall	OIPC	Discussion #1	health and health promotion	Exploring the social determinants of health within community population health initiatives, learners will be able to: 1. Discuss enhancers and challengers to being part of a functioning	Team Functioning	on-line discussion	Novice / Beginner	Exposure / Awareness	Level 2a: Modification of perceptions & attitudes	Affective	participation	32		
All RFHS	1	fall	OIPC	Discussion #1	health and health promotion	Exploring the social determinants of health within community population health initiatives, learners will be able to: 2. Discuss what it means to be healthy.	IP Communication	on-line discussion	Novice / Beginner	Exposure / Awareness	Level 2a: Modification of perceptions & attitudes	Cognitive	participation	32		
All RFHS	1	fall	OIPC	Discussion #2	individual and professional contributions to the team	Exploring the social determinants of health within community population health initiatives, learners will be able to: 1. Integrate team member's viewpoints, soliciting input from members and ensuring a common understanding of team decisions.	Team Functioning	on-line discussion	Novice / Beginner	Exposure / Awareness	Level 2a: Modification of perceptions & attitudes	Cognitive	participation	32		
All RFHS	1	fall	OIPC	Discussion #2	individual and professional contributions to the team	Exploring the social determinants of health within community population health initiatives, learners will be able to: 2. Focus on the patient/client/family/community expressed needs and lived experiences.	IP Communication	on-line discussion	Novice / Beginner	Exposure / Awareness	Level 2a: Modification of perceptions & attitudes	Affective	participation	32		
All RFHS	1	fall	OIPC	Discussion #3	team work and poverty	Exploring the social determinants of health within community population health initiatives, learners will be able to: 1. Consider team member's viewpoints, gathering input from team	IP Communication	on-line discussion	Novice / Beginner	Exposure / Awareness	Level 2b: Acquisition of knowledge & skills	Psychomotor	participation	32		
All RFHS	1	fall	OIPC	Discussion #3	team work and poverty	Exploring the social determinants of health within community population health initiatives, learners will be able to: 3. Relate the concept of 'patient/client/family/community as experts in their own lived experiences' to one's own healthcare experience.	Team Functioning	on-line discussion	Novice / Beginner	Exposure / Awareness	Level 2b: Acquisition of knowledge & skills	Affective	reflection	32		
All RFHS	1	fall	OIPC	Discussion #3	team work and poverty	Exploring the social determinants of health within community population health initiatives, learners will be able to: While discussing the three dimensions of the Population Health Model in relation to a fictional case, learners will be able to: 1. Integrate team member's viewpoints, soliciting input from members and ensuring a common understanding of team decisions.	Patient/client/familycommu	on-line discussion	Novice / Beginner	Exposure / Awareness	Level 2a: Modification of perceptions & attitudes	Cognitive	participation	32		
All RFHS	1	winter	OIPC	F2F #2: Interprofessional Collaboration for Healthy	IPC for Antiracism	While discussing the three dimensions of the Population Health Model in relation to a fictional case, learners will be able to: 1. Integrate team member's viewpoints, soliciting input from members and ensuring a common understanding of team decisions.	IP Communication	tutorial	Novice / Beginner	Exposure / Awareness	Level 2a: Modification of perceptions & attitudes	Cognitive	participation	65		
All RFHS	1	winter	OIPC	F2F #2: Interprofessional Collaboration for Healthy	IPC for Antiracism	While discussing the three dimensions of the Population Health Model in relation to a fictional case, learners will be able to: 2. Focus on the patient/client/family/community expressed needs and lived experiences.	Patient/client/familycommu	patient story	Novice / Beginner	Exposure / Awareness	Level 2a: Modification of perceptions & attitudes	Psychomotor	survey	65		
All RFHS	1	winter	OIPC	F2F #2: Interprofessional Collaboration for Healthy	IPC for Antiracism	While discussing the three dimensions of the Population Health Model in relation to a fictional case, learners will be able to: 3. Relate the concept of 'patient/client/family/community as experts in their own lived experiences' to one's own healthcare experience.	Team Functioning	tutorial	Functional	Immersion / Application	Level 3: Behavioural	Affective	reflection	65		



RFHS IPE MAP

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A1 Learners

	A	B	C	D	E	F	G
1	Learners	Year of Program	Term	Course #	Session Title	Topic	Session Learning Objectives
	PT, Pharmacy	2	winter	PT 7160	Interprofessional Mobility Aids	fitting mobility aids & advising on meds	Senior pharmacy and physiotherapy students will consider role clarification applied to a fit
2	PT, Pharmacy	2	winter	PT 7160	Interprofessional Mobility Aids	fitting mobility aids & advising on meds	Physiotherapy students will be able to identify the risks associated with recommendations pharmaceutical management of acute pain of musculoskeletal origin.
3	PT, Pharmacy	2	winter	PT 7160	Interprofessional Mobility Aids	fitting mobility aids & advising on meds	Pharmacy students will learn how to measure canes and axillary crutches in order to sell to
4	Med, OT, PT, RT, PA	1	winter	PT 6260	Interprofessional Bioethics	Bioethics	1. Build on your understanding of how interprofessional collaboration can enhance patient care and provider satisfaction.
5	Med, OT, PT, RT, PA	1	winter	PT 6260	Interprofessional Bioethics	Bioethics	2. Introduce interprofessional learners to each others' codes of ethics.
6	Med, OT, PT, RT, PA	1	winter	PT 6260	Interprofessional Bioethics	Bioethics	3. Work through cases requiring interprofessional collaboration and communication.
7	Med, OT, PT, RT, PA	1	winter	PT 6260	Interprofessional Bioethics	Bioethics	4. Discuss approaches for resolving ethical challenges and enhancing patient/client care.
8	All RFHS	combined			WISH Clinic	primary health	Address the health and social needs of the community we serve, while facilitating an inter learning environment for students.
9	Med, OT, PT, CHP, Pharm	2	spring	PT 7292	Pain: Collaboration for Better Care	chronic pain	1. Describe the various roles and responsibilities of clinical psychology, medicine, nursing, occupational therapy, pharmacy, physical therapy, physician assistants, and social work in patient-centred care for individuals with chronic pain.
10	Med, OT, PT, CHP, Pharm	2	spring	PT 7292	Pain: Collaboration for Better Care	chronic pain	2. Identify shared and unique contributions of different team members in the assessment of pain.
11	Med, OT, PT, CHP, Pharm	2	spring	PT 7292	Pain: Collaboration for Better Care	chronic pain	3. Construct a problem list and propose an initial approach to patient care, given limited c information

Core Competencies Tables PIPES Rating OIPC Dental Hygiene Dentistry Medicine Nursing OT PA Pharmacy PT RT Consultation

READY 90%





FEEDBACK

“This is such a great initiative...The RFHS (Faculty) needs more of these collaborative, free-flow of information tools”.

(Integrated Accreditation Unit)

- drop-down menus were easy to use and offered the right amount of detail for accreditation purposes
- encouraged the “Read-me” tab

“This is amazing and a very ambitious project!”

(Expert in curriculum mapping)





CONCLUSION

- A faculty-wide common curriculum map is feasible
- Challenges of maintenance to be determined
- Usability across programs to be determined



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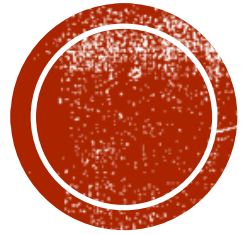
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**THANK YOU.
QUESTIONS?**

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