PERCEPTIONS AND READINESS OF THE HEALTH POLYTECHNIC OF THE MINISTRY OF HEALTH RIAU STUDENTS IN IMPLEMENTING IPE-BASED OF INTEGRATED REAL WORK PRACTICE

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Abstract

Interprofessional Education (IPE) emphasizes collaborative practice between two or more health professions. The Integrated Real Work Practice of the Health Polytechnic of the Ministry of Health Riau applies the IPE concept, among students of nutrition, midwifery, and nursing. Core competencies for IPE are roles and responsibilities; ethical practice; conflict resolution; communication; and collaboration and teamwork. The purpose of this study was to analyze the relationship between students' perceptions and readiness in implementing the IPE-based of integrated real work practice of the Health Polytechnic of the Ministry of Health Riau. This research is a descriptive study using a cross sectional design in which the measurement of variables was only done once at a time. The sample collection technique was accidental sampling of final year students who attended the integrated real work practice of the Health Polytechnic of the Ministry of Health Riau. The total sample of the study was 230 students, consisting of 76 nutrition students, 63 midwifery students, and 91 nursing students. The instruments used in this study were the Interdisciplinary Education Perception Scale (IEPS) to measure student perceptions and the Readiness for Interprofessional learning Scale (RIPLS) to measure student readiness. The data was carried out in May 2022 and then been analyzed using the Chi Square method to measure the relationship between the perception and the readiness of the students. The results showed that there was a statistically significant relationship (p = 0.000 or p <0.05) between perceptions and readiness of the Health Polytechnic of the Ministry of Health Riau students in the implementation of IPE-based integrated real work practice. IPE can be implemented successfully and benefits students in real community problems. The program should be evaluated and improved to assure all students from different schools to get equal benefits.

Keywords: Interprofessional Education (IPE); Perception; Readiness; Real Work Practice
1. Introduction

Interprofessional Education (IPE) emphasizes collaborative practice between two or more health professions. (Theobald et al., 2013) Interprofessional education (IPE) refers to “occasions when two or more professionals learn with, from and about each other to improve collaboration and the quality of care”. This contrasts with multi-professional education where health professionals learn alongside one another in a parallel manner. Several studies have shown that IPE promotes interdisciplinary collaboration and teamwork, reduces the barriers and preconceptions prevailing among various healthcare groups and promotes professional competencies (Guraya & Barr, 2018). Core competencies for IPE are roles and responsibilities; ethical practice; conflict resolution; communication; and collaboration and teamwork. (Interprofessional Educational Collaborative, Practice, & Values, 2016) Interprofessional simulation is a teaching strategy that shows great promise for promoting teamwork among the healthcare professions. (Costello et al., 2017). Health Polytechnic of the Ministry of Health Riau has implemented the Integrated Real Work Practice which involved the study of nutrition, midwifery, and nursing.

The IPE-based integrated real work practice at the Health Polytechnic of Ministry of Health Riau was carried out starting in 2019 as a learning process in the field for students in collaborating with various professions and at the same time as a vehicle for community health empowerment. This scheme is planned and implemented in a systematic and integrated manner based on health problems solving extracted from the family, formulated and implemented with the family. This activity is expected to spur the ability of families to recognize problems, develop themselves and their environment, improve their quality of life and health. To improve the competence of lecturers in guiding integrated real work practice, the Health Polytechnic of the Ministry of Health Riau held a Workshop on the Development of the Center of Excellence (CoE) of the Stunting Study Center of the Health Polytechnic of the Ministry of Health Riau. The curricula were the theory of IPE concepts and domains, IPE learning methods, and the implementation of Interprofessional Education (IPE) in Real Work Practice. The theme of The IPE-based integrated real work practice program in 2022 was “ IPE-Based Controlling Stunting during Covid-19 Pandemic in Kampar Regency” to support the Center of Excellence (CoE) of the Stunting Study Center of the Health Polytechnic of the Ministry of Health Riau. It was a form of embodiment of the vision and mission of the Health Polytechnic of Ministry of Health Riau in supporting the Tri Dharma of Higher Education – especially in the field of Community Service. Through this program, it is expected to increase empathy, concern, collaboration of students from study of nutrition, midwives, and nurses with a collaborative approach to improve the quality of society and improve nutritional and health status. (Warijan, Marsum, Indriyawati, & Jannah, 2018). Implementation of the program as a form of education by providing a learning experience for students to live in the community outside the campus. Together with the community, students can directly identify the occurrence and deal with public health problems. Activities carried out to help solve health development problems in the regions are carried out collaboratively from study of nutrition, midwifery, and nursing.

One of the CoE case studies based on IPE is health services for children under five in the household. Students will examine the problems of toddlers, then plan, provide interventions, and monitor and evaluate the clinical care provided. The clinical care must be based on the approach of the nutrition, nurses, and midwives profession. For example, in postpartum mothers with low birth weight babies, it is necessary to provide nursing care for postpartum mothers’ wound care, postpartum maternal health monitoring by midwives, and nutritional care for low birth weight infants. Based of the previous study, mother Toddler class can improve the knowledge, attitudes and skills of mothers in caring for toddlers. Mother’s attitude towards the health of children under five is very important because it can influence mothers in maintaining health behaviour towards themselves and their children. Midwifery, Nursing, Nutrition, Sanitarian/Environmental Health can contribute to Mother Toddler Class according to competence each. Collaboration from various health professions can be done in an effort to improve health services for toddlers through the Mother
Toddler Class with the IPE approach. (Susanti, Wulandari, Juaeriah, & Dewi, 2017) Patient care must be seen as an integrated process. IPE is one way to integrate the expertise of health workers from various fields by encouraging professionals health to share knowledge and work in teams, with collaboration between health professions, can reduce job overlap, accelerate service delivery, and provide more comprehensive information for patients. (Sulistyowati, 2019). The benefit of IPE activities is that students can learn to collaborate and function in a team and bring these knowledge, skills and attitudes into practice in the future. (Morato, Diarthini, & Utami, 2021). The purpose of this study was to analyze the relationship between students' perceptions and readiness in implementing the IPE-based of integrated real work practice of the Health Polytechnic of the Ministry of Health of Riau.

2. Material and Methods

This research is a descriptive study using a cross sectional design in which the measurement of variables was only done once at a time. The sample collection technique was accidental sampling of final year students who attended the integrated real work practice of the Health Polytechnic of the Ministry of Health of Riau. The total sample of the study was 230 students, consisting of 76 nutrition students, 63 midwifery students, and 91 nursing students. The instruments used in this study were the Interdisciplinary Education Perception Scale (IEPS) to measure student perceptions and the Readiness for Interprofessional learning Scale (RIPLS) to measure student readiness. The type of measurement scale used is a Likert scale of 5 (five) consists of favorable and unfavourable. The data was carried out in May 2022 and then analyzed using the Chi Square method.

3. Results and Discussion

The respondents of this study are final year students who attended the integrated real work practice of the Health Polytechnic of the Ministry of Health Riau. The total respondent of the study was 230 students, consisting of 76 nutrition students, 63 midwifery students, and 91 nursing students which 97,3% were female and 3% were male. The age range of the respondents is 19-27 years old which 51,7% of the total respondents are 21 years old.

The average score of Interdisciplinary Education Perception Scale (IEPS) was 62,6% (good category) and the Readiness for Interprofessional learning Scale (RIPLS) was 64,2 (good category). The results of this study showed that there was a statistically significant relationship (p = 0.000 or p <0.05) between perceptions and readiness of the Health Polytechnic of the Ministry of Health Riau students in the implementation of IPE-based integrated real work practice. The results of the previous study revealed that midwives, nurses and nutrition students had higher perceptions of post-interprofessional learning after participating in the IPE program. This shows that the IPE program can increase students' positive perceptions about their readiness to work in multidisciplinary teams (Oktovina Mobalen, Ruth Hariet Faidiban, 2021).

The core competencies and sub-competencies feature the following desired principles: patient and family centered (hereafter termed “patient centered”); community and population oriented; relationship focused; process oriented; linked to learning activities, educational strategies, and behavioural assessments that are developmentally appropriate for the learner; able to be integrated across the learning continuum; sensitive to the systems context and applicable across practice settings; applicable across professions; stated in language common and meaningful across the professions; and outcome driven.

The four core competencies are:

1. Work with individuals of other professions to maintain a climate of mutual respect and shared values (values/ethnics for Interprofessional practice).
2. Use the knowledge of one’s own role and those of other professions to appropriately assess and address the health care needs of patients and to promote and advance the health to populations (roles/responsibilities).

3. Communicate with patients, families, communities, and professionals in health and other fields in a responsive and responsible manner that supports a team approach to the promotion and maintenance of health and the prevention and treatment of disease (Interprofessional communication).

4. Apply relationship-building values and the principles of team dynamics to perform effectively in different team roles to plan deliver, and evaluate patient/population-centered care and population health programs and policies that are safe, timely efficient, effective, and equitable (teams and teamwork).

IPE-based learning will increase students’ knowledge, skills, and attitudes about collaborative teamwork and improve the quality of health services. (van Diggele, Roberts, Burgess, & Mellis, 2020) The benefits of IPE activities are students can learn to collaborate and function in a team and bring this knowledge, skills, and attitudes into future practice through enhancing several aspects such as communicating, collaborating, determining the roles and responsibilities of each profession, conflict management, decision making, sharing knowledge and skills and finally mutual respect between friends. Based on the cited literature review, it can be cited that interprofessional education (IPE) is a way to increase competence and collaboration skills between professions so that it can create health professionals who are professional, capable, and able to improve the quality of health services. (Morato, Diarthini, & Utami, 2021).

The importance of implementing IPE for prospective health workers, which has led the Directorate General of Higher Education of the Ministry of Education and Culture since 2011 to develop Health Professional Education Quality (HPEQ) projects in the form of several programs based on the values of collaboration and interprofessional education (Prasaja, 2015). In the context of structuring the education system and improving the quality of higher education in the health sector, the Directorate General of Higher Education of the Ministry of National Education through the Health Professional Education Quality (HPEQ) project has organized the 2nd HPEQ International Conference which aims to share best practices, experiences, and achievements in running and developing the education system. The theme of the conference was 'Promoting Health Through Interprofessional Education' (Kemdikbud, 2011).

The IPE-based integrated real work practice at the Health Polytechnic of Ministry of Health Riau was concepted to determine and prioritize family problems on accountable grounds; determine the factors that cause the problem in accordance with the basics of theory; and establish a problem-solving intervention plan in accordance with the theory and the existing conditions. Students form groups consisting of nutrition studies, nurses, and midwives to develop problem assessments, planning, intervention, and monitoring evaluations of the clinical care provided. Clinical care provided must be approached by the profession of nutrition, nurses, and midwives. THE 90 MINUTES interprofessional small group sessions (Bridges, Davidson, Odegard, Maki, & Tomkowiak, 2011) was:

1. Demonstrate collaborative interprofessional team characteristics and behavior
2. Analyze a healthcare interaction for qualities of patient-centered care
3. Reflect on service learning as a way to demonstrate social responsibility
4. Identify other healthcare providers that may be of benefit to a particular patient
5. Analyze a medical error situation to formulate a suggestion for solving the problem
6. Identify situations in which individual, institution, or government advocacy may be appropriate
7. Discuss current issues that impact all healthcare professions

When health care professionals such as nurses, pharmacists, nutritionists, physical therapists and doctors collaborate, it provides a positive and beneficial care environment for better and guaranteed health care outcomes. (Anwar & Rosa, 2019). Based on the results of previous study, most of the undergraduate students from the three school of health: medicine, nursery, and nutrition had learned a lot about interprofessional attitudes during the implementation
of the Community and Family Health Care (CFHC) program, but medical and nursery students have more advantages compared to nutrition students. CFHC is an interprofessional training which applies IPE in an educational setting. Students' experience in implementing IPE will help them to be able to solve real community problems by applying theories given in lectures. (Widyandana, 2018) Education with the application of Interprofessional Education Collaborative Practice (IPE-CP) is very influential in increasing the knowledge and attitudes of pregnant women about balanced nutrition in the third trimester in the district of Tulang Bawang Barat, Lampung Province. Furthermore, the most influential effect size is the attitude of pregnant women about balanced nutrition. (Sudarmi, Bertalina, & Aprina, 2020).

The limitation of this study was couldn’t be generated to another community since the sample collection technique was accidental sampling. This study captured the relationship between perceptions and readiness of the Health Polytechnic of the Ministry of Health Riau students in the implementation of IPE-based integrated real work practice but didn’t described how the IPE implanted. There should be another research that can be describe how the IPE implemented, the collaboration between more than two profession to solve the health problem and improve the healthcare system.

4. Conclusion

There was a statistically significant relationship (p=0.000 or p <0.05) between perceptions and readiness of the Health Polytechnic of the Ministry of Health Riau students in the implementation of IPE-based integrated real work practice. IPE can be implemented successfully and benefits students in real community problems. Riau Health Ministry Polytechnic students already have the perception and readiness in implementing IPE. The students can solve household health problems in accordance with the professions of nutrition, nurses, and midwives. The program should be evaluated and improved to assure all students from different schools to get equal benefits.

References


http://www.eea.europa.eu/soer-2015/europe/forests#tab-based-on-indicators
