

UCSF

UC San Francisco Previously Published Works

Title

Commentary on: New rules for the game: Interdisciplinary education for health professionals

Permalink

<https://escholarship.org/uc/item/5zv3v880>

Journal

Nursing Outlook, 60(5)

ISSN

0029-6554

Authors

Woods, Nancy F

Gilliss, Catherine L

Publication Date

2012-09-01

DOI

10.1016/j.outlook.2012.07.008

Copyright Information

This work is made available under the terms of a Creative Commons Attribution License, available at <https://creativecommons.org/licenses/by/4.0/>

Peer reviewed

27. National League for Nursing. A view for nursing education. New York: National League for Nursing; 1993.
28. Bulger RJ. The role of America's academic health centers in a reformed health system. *J Am Health Policy* 1992;2: 35-8.
29. Pew Health Professions Commission. Health professions education for the future: schools in service to the nation. San Francisco: Pew Health Professions Commission; 1993.
30. Alliance for Health Reform. Commanding generalists: increasing the availability of community-based primary care practitioners. Washington: Alliance for Health Reform, 1993.
31. Munding MO. Advanced-practice nursing—good medicine for physicians [Editorial]? *N Engl J Med* 1994;330:211-3.
32. Kassirer JP. What role for nurse practitioners in primary care [Editorial]? *N Engl J Med* 1994;330:204-5.

Commentary on: New rules for the game: Interdisciplinary education for health professionals

Just as Gilliss and Woods recommend that the complementarity of practitioner and researcher roles *within the discipline* must be addressed, so also must we recommit to the complementarity of roles *across the disciplines* that contribute to patient care and the science that undergirds our care. Nearly 20 years ago Larson (1995) made the case for interdisciplinary education for the health professions, reminding us that, although we had stopped playing the “doctor-nurse” game of the 1960s, we had not yet created new models for interdisciplinary interactions. At the time of Larson’s article, only five of 35 academic health centers offered even one interdisciplinary course and in her analysis of several professional organizations’ agendas for nursing and medical education, mention of interdisciplinary collaboration was rare.

Larson’s 20-year old observation unfortunately remains a current concern shared by others, notably the Josiah Macy Jr. Foundation. Beginning with their invitational meetings and related publication, *Who Will Deliver Primary Care and How Will They be Trained?* the Macy Foundation (2010) has accelerated its support for a rational approach to health professions collaborations that begins with interdisciplinary education and continues with the thoughtful design of care delivered by a team of health professionals. In the U.S., a collaboration of professional organizations, the Interprofessional Education Collaborative (IPEC), brought together the American Association of Colleges of Nursing, American Association of Colleges of Osteopathic Medicine, American Association of Colleges of Pharmacy, American Dental Education Association, Association of American Medical Colleges, and Association of Schools of Public Health in an effort to identify core competencies for interprofessional collaborative practice (IPEC 2011). Frameworks reflecting the interdependence between health professional education and practice prompt educators and scientists to study processes involved in teaching and practicing collaboratively in the service of advancing health professions’ learners and patients, providers, and system outcomes.

In the same period, The Bill and Melinda Gates Foundation, The Rockefeller Foundation, and the China Medical Board supported an international commission

to examine transformation of health professional education to strengthen health systems in an increasingly interdependent world (Frenk et al., 2010). The Commission asserts that interdependence is a key element of a systems approach and that interdependence in education involves shifting from “isolated to harmonized education and health systems; from stand alone institutions to networks, alliances, and consortia; and from inward-looking institutional preoccupations to harnessing global flows of educational content, teaching, resources, and innovations” (p. 1924).

We in nursing are challenged simultaneously to realign our graduate programs to educate future advanced practice nurses and scientists as we integrate both into a rapidly changing world of interprofessional collaboration. Now would seem an opportune time to revisit the structure of how we educate our graduate students, revisiting our intraprofessional *and* interprofessional efforts, increasing the fidelity of our curricula to the agenda for providing and translating the evidence from our research to practice, and harnessing global connections to transform the healthcare systems of the future. How can we possibly implement this agenda when higher education is in the midst of financial crisis, the global economy is unstable, and healthcare is challenged by escalating demand and cost? As those who work in the arena of solving “Wicked Problems” (Brown et al., 2010) would counsel, this is precisely the time for true transdisciplinary work to forge transformative solutions!

REFERENCES

-
- Frenk J, Chen L, Bhutta ZA, Cohen J, Crisp N, Evans T, Fineberg H, Garcia P, Ke Y, Kelley P, Kistnasamy B, Meleis A, Naylor D, Pablos-Mendez A, Reddy S, Scrimshaw S, Sepulveda J, Serwadda D, Zurayk H (2010). Health professionals for a new century: Transforming education to strengthen health systems in an interdependent world. *Lancet*, 376:1923-57.
- Interprofessional Education Collaborative Expert Panel. (2011). *Core competencies for interprofessional collaborative practice: Report of an expert panel*. Washington, DC: Interprofessional Education Collaborative; 2011.

Brown V, Harris J, Russell J, (Eds.). (2010). *Tackling wicked problems through the transdisciplinary imagination*. London, UK: Earthscan.

Duke University, Durham
North Carolina

Nancy F. Woods, PhD, RN, FAAN
Professor and Dean Emerita
School of Nursing
University of Washington
Seattle, Washington

Corresponding author: Dr. Nancy F. Woods
Professor and Dean Emerita
School of Nursing
University of Washington
Seattle, Washington

Catherine L. Gilliss, DNSc, RN, FAAN
Dean and Helene Fuld Professor of Nursing
Vice Chancellor for Nursing Affairs
School of Nursing

0029-6554/\$ - see front matter
© 2012 Elsevier Inc. All rights reserved.
<http://dx.doi.org/10.1016/j.outlook.2012.07.008>