

12 Tips for Education Needs Assessments through an Interprofessional Lens

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Introduction:

Have you been asked to plan education for an interprofessional team? Don't know where to begin? You may be familiar with the many benefits of interprofessional education (IPE) and care (Reeves et al, 2013; WHO, 2010), and have likely participated in or led an education needs assessment before based on tried and true practices (for example, Grant, 2002). However, it is increasingly clear that "...with the growing awareness of the importance of educating the clinical team, needs assessments without an interprofessional component will fall short" (Moore et al, 2011, p. 221). These tips, with embedded reflection questions drawn from the education literature and experience, were designed for use by planning groups to identify actionable steps to optimize the development of inclusive team-based interventions for learning.

1) Build an interprofessional planning team for the needs assessment

- How are diverse and applicable professions and roles represented on the planning team? (e. g. regulated and other care providers? support service workers? patients and family members? learners?)
- How well does the planning team reflect the learning community?
- How will other formal and informal leaders be engaged in the planning process?

2) Identify stakeholders based upon principles of inclusivity

- Consider stakeholders broadly when designing your needs assessment and in deciding who will participate (e.g. in interviews, surveys, focus groups)
- Optimize inclusivity – ask: 'is there anyone else who should be part of this work?' (e.g. other departments, professions and roles who may be impacted)
- Consider patients, clients, and community members who could be engaged as part of the team
- Are there stakeholders external to your organization who should be consulted? (e.g. regulatory bodies, partner organizations, educational institutions)

3) Be purposeful about modeling interprofessional collaboration within the planning team

- Consider ways to enact principles of collaborative leadership on the planning team (e.g. co-leadership model) (e.g. Raelin, 2003)
- Implement strategies that enable psychological safety (Edmondson, 1999)
- Consider tools and resources to advance collaboration on the planning team e.g. collaborative competency frameworks; 'interprofessional lens' (for example, see: <http://www.ipe.utoronto.ca/tools-resources/tools-toolkits>)
- Collectively establish group norms or agreed upon ways of working within the team (e.g. what will our process be for shared decision making?)

4) Contemplate interprofessional ways of capturing misperceived and/or unperceived needs

- How can patients and/or family members provide feedback to identify learning needs?
- What patient data sources already exist that capture information from diverse perspectives? (e.g. critical incident reports, chart audits, safety incident reports?)
- What professional development data already exists that can be leveraged? (e.g. teaching scores, data from learning management systems, analysis of patterns of continuing education requests)
- Are there reports available detailing the impacts of team function? (e.g. communication patterns, team assessments, team and staff engagement data, quality of care data)

5) Consider your stakeholders in selecting methods for your needs assessment

- Consider what methods may work best to access information from diverse stakeholders (i.e. consult with stakeholders directly to inform approach)
- Contemplate opportunities to build collaboration through information gathering – are there groups that haven't met together before?
- Be sensitive to issues of power and hierarchy among stakeholders (e.g. would a one-to-one approach be most effective or a group meeting?)
- Build on past successes and experiences in working with particular groups – what has worked well in the past?
- Remember that repeating the same assessment (e.g. a focus group) separately with individual groups of different professions/stakeholders is 'multiprofessional' (elicits *"what I need, what you need"*), while a single assessment that includes diverse professions and stakeholders is a more interprofessional approach (elicits *"what we need"*)

6) Incorporate effective interprofessional group facilitation strategies throughout the needs assessment (e.g. for planning committee meetings, focus groups, key informant dialogues)

Key interprofessional facilitation tips include:

- Ensure all members have the opportunity to participate
- Avoid jargon and clarify acronyms
- Demonstrate the value of each profession and member
- Address power and hierarchy in group dynamics and process
- Use co-facilitation (with members of different professions partnering to lead focus groups, for example)
- Look for opportunities within group meetings to engage members to facilitate or lead particular aspects
- Determine when you may need an external facilitator
- Refer to additional interprofessional facilitation tips (e.g. Centre for IPE)

7) Leverage existing interprofessional forums/positions within your organization (e.g. for consultation, planning, feedback)

- Liaise with existing interprofessional groups such as a professional practice advisory committee, education council, team meetings, etc.
- Determine leaders with whom you can consult – those whose roles cross professions (e.g. Director of Professional Practice, Vice President of Clinical Programs, Medical Director, Manager of Education, Interprofessional Education/Care Leader, etc.)
- Test your plan for the needs assessment at interprofessional venues and use feedback to inform your approach

8) Identify unique and shared learning needs across professions and roles

- Shared learning needs and profession-specific learning needs will coexist and both can be effectively addressed in IPE programs
- What are the curricular “gaps” that could be best addressed through learning together?
- What content may be more appropriate to address in single profession settings?
- What do groups need to know about one another? (e.g. roles and scopes)
- Consider how to identify strong knowledge or skill sets amongst one group of participants that could be used to effectively to address the learning needs of another (i.e. opportunities to learn from one another)
- In considering your participant group collectively, consider what team level learning needs ought to be addressed (e.g. conflict resolution, communication)

9) Consider the facilitators and resources that have enabled past interprofessional initiatives to be successful, and how this learning may inform new opportunities for IPE

- When have attendees previously noted value in bringing together diverse groups?
- What topics worked best and what types of learning activities worked well?
- Who were your champions and informal leaders that made these initiatives successful?
- What has previously enabled successful engagement of different groups? You may need different strategies to reach different professions and roles

10) Recognize the generative potential of needs assessments to initiate change and begin your education intervention

- Needs assessments themselves are interventions that can begin to motivate change
- Use generative questioning to stimulate reflection amongst team members and collective discovery of team strengths and opportunities (i.e. use appreciative inquiry methods) (Hammond, 1998)
- Discussing needs assessment findings collectively as a team and with your stakeholders enables the creation of shared meaning and engagement

11) It's iterative.... Be open to the possibility that emerging needs may become apparent at any time in design, implementation and program evaluation activities

- Consider structures, tools and process factors that might be needed to achieve your education objectives (e.g. equipment gaps, shared meeting space, communication tools)
- Given the complexity of interprofessional experiences, it is unlikely that all needs will be recognized at the start of your planning process; consider how evaluation data can be gathered throughout the process to inform learning experiences
- Consider the value of the needs assessment process for your own development as an educator and lifelong learner (i.e. challenge your own stereotypes and preconceived notions)

12) Reflect on key learnings at the end of the program

- Bring the team back together to analyze your results from an interprofessional lens to inform ongoing or future learner and planning team needs
- Share learnings across systems and teams value of using an interprofessional approach to educational needs assessments
- Celebrate successes!

References:

Centre for Interprofessional Education, University of Toronto. *Interprofessional Lens*. Available at: <http://www.ipe.utoronto.ca/sites/default/files/Interprofessional%20Lens.pdf>

Centre for Interprofessional Education, University of Toronto. *Team Facilitation and Troubleshooting Tips*. Available at: <http://www.ipe.utoronto.ca/content/team-facilitation-troubleshooting-tips>

Continuing Professional Development, Faculty of Medicine, University of Toronto. *Quick Tips: How to Conduct a Learning Needs Assessment*. Available at: <http://www.cpd.utoronto.ca/quicktips-docs/05-How-to-Conduct-a-Needs-Assesment.pdf>

Edmondson, A. C. (1999). Psychological safety and learning behavior in work teams. *Administrative Science Quarterly*, 44, 350–383.

Grant J. learning needs assessment: Assessing the need. *BMJ*, 2002;324:156-9.

Hauer, J & Quill, T (2011). Educational Needs Assessment, Development of Learning Objectives, and Choosing a Teaching Approach. *Journal of Palliative Medicine*, 14(4):503-508.

Hammond, SA. (1998). *Thin Book of Appreciative Inquiry*, 2nd Edition. Bend, Oregon: Thin Book Publishing Co.

Keister, D & Grames, H. (2012). Multi-method needs assessment optimizes learning. *The Clinical Teacher*; 9: 295–298

Moore, HK, McKeithen, TM, Holthusen, AE (2011). A Mixed-Methods, Multiprofessional Approach to Needs Assessment for Designing Education. *Journal of Continuing Education in the Health Professions*, 31(3):220–221.

Raelin, J. (2003). *Creating Leaderful Organizations: How to Bring Out Leadership in Everyone*. San Francisco, CA: Berrett-Koehler.

Reeves S, Perrier L, Goldman J, Freeth D, Zwarenstein M. (2013). Interprofessional education: effects on professional practice and healthcare outcomes (update). *Cochrane Database Syst Rev*. 2013 Mar 28;(3)

World Health Organization (WHO). (2010). *Framework for action on interprofessional education and collaborative practice*. http://www.who.int/hrh/resources/framework_action/en/

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