This document sets out the key findings of the Interprofessional Education in Pharmacy: Global Report, 2015 (available at www.fip.org/educationreports). The International Pharmaceutical Federation (FIP) and FIP Education Initiative have made a commitment to ensure that reports and communications to members are purposeful and useful. The intention of this document is to provide helpful guidance and navigation for our FIP stakeholders and to enable our member organisations to prepare briefings and communiqués for their own networks and stakeholders. We have signposted key messages, which we think are of most relevance for different categories of stakeholders.

PROFESSIONAL ASSOCIATIONS

In examining some of the key findings from the case studies, pharmaceutical professional bodies or associations have an important role to play in creating a common vision for team-based care, to promote engagement between healthcare professions as well as to contribute to the development of leaders and resources for interprofessional learning. Collaboration among professional bodies and/or associations from healthcare professionals can be the starting point for advancing team-based approaches promoting holistic patient-centered care.

A collaborative practice-ready workforce cannot exist without first establishing effective interprofessional education. The global initiative case study in the report describes the World Health Organization efforts for transforming and scaling up health professionals’ education and training. Included in the education and training was a global evaluation tool to support countries analysing their current situation of health workforce education providing a roadmap for transforming the education process so that the goal of universal health coverage can be achieved. This methodology can be used by professional bodies to perform similar analysis at a national level.

In the case study presented by Lebanon, findings suggest that the continuation of comprehensive and mandatory interprofessional education throughout the curriculum promotes positive changes in attitudes among future healthcare professionals.

The new approaches to interprofessional learning also imply that programmes of education and professional development need to be adjusted consequently. Other examples provided can be source of inspiration.

Professional associations have a crucial role to play in incorporating interprofessional education and training as a part of key policies and strategic initiatives on a national and/or regional level, to support and create collaboration between healthcare professionals.

As one of the key providers for professional development, professional bodies or associations have the opportunity to provide pharmacists with interprofessional education programmes, if they have not yet been established, resulting in better healthcare, higher patient satisfaction, increased efficiency and decreased cost.

Both WHO and FIP have agreed that interprofessional education (IPE) is a foundation that leads to a collaborative, practice-ready workforce, and collaborative practice leads to a strengthened healthcare system, resulting in improved patient health outcomes.
**HIGHER EDUCATION INSTITUTIONS**

Academic higher education institutions are also important stakeholders in creating ways to create a common vision in collaborative care approaches to care being featured in 10 out of 14 case studies in the report. From a curriculum perspective, for example, all healthcare professions study pharmacology to a varying extent. As pharmacology courses are being revised and updated, it can be used as a common thread to provide areas of interest across multiple learners. Building connections using these areas of common interest can serve as an opening for learning about, from and with one other. This includes 'applied' pharmacology and therapeutics and issues of medicines prescribing.

The case study in the UK illustrates an interprofessional discussion about the management of pain medicines. Here, students of medicine, nursing, pharmacy, physical therapy, social work, and nutrition, discuss pharmacotherapy for pain control which feeds into a team building experiences. Other common professional curricula, such as quality improvement or communication science, may be jointly taught in shared environments among professions early in their training.

In the Malaysia case study, a co-curricular module introduces the concepts of interprofessional practice to first-year students in allied health, audiology and speech therapy, dentistry, medical imaging, medicine, nursing, and pharmacy. Efforts were made to make it successful but it was not sustainable, and lessons can be learned from this case study. On the other hand, in the second Malaysia case study using a “jigsaw learning” technique, the shared workshops were seen as a starting point to ignite and inspire a stronger sense of collaborative learning.

Case examples can be a source of inspiration for higher education institutions, which are undergoing the process of revising their curricula and want to include interprofessional education. Learning together at the different stages of the profession, pre-registration or post-registration, will improve the communication and sharing expertise among health professionals, which ultimately will enhance patient care outcomes.

**EMPLOYERS**

Employers have been an important stakeholder in the practice aspect of interprofessional learning, by creating the opportunity and by supporting a team-based approach at work, for example in a hospital or clinic setting. As well employers are creating new opportunities in the community setting at they start to transform retail stores to community health management venues opening the need for collaborative care approaches.

When considering interprofessional learning the employer can consider the following elements:

- To define a specific competency or developmental framework for their staff, helping to link professional roles, performance and competencies required for a team-based approach to care
- To help and support identify the skills needed in practice to improve performance
- Facilitate interprofessional development activities for their staff
- Being actively involved with the implementation of a team-based approach helps employers ensure their pharmacists are prepared and motivated to meet the competency requirements of the changing practice environment.

FIP will encourage its members to engage in a interprofessional dialogue inspired by the WHO Transformative Education movement and the findings of the FIP report.

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Interprofessional Education in a Pharmacy Context Global Report, available to download at: www.fip.org/educationreports

For further information: education@fip.org or visit http://www.fip.org/education

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