

Summary
Small Group Discussion
Interdisciplinary Training and Practice Workgroup
MCH Training Program
Joint Meeting
LEND, LEAH, PPC, SPH Grantees
March 4, 2007

Background

Workgroups were established by the MCH Training Program as a strategy to provide training program grantees and affiliated colleagues with an opportunity to:

- Directly impact policies and procedures that guide the MCH Training Program
- Enhance the achievement of the MCH Training Program Strategic goals and objectives
- Assist in the telling of the “MCH Story”.

The purpose of the Interdisciplinary Training and Practice Workgroup¹ is to support the organization and conduct of comprehensive, high-quality interdisciplinary practices that will promote positive MCH outcomes in the training programs and in community-related activities. The first task of the group was to compile a definition of “interdisciplinary” as this definition is fundamental to the development of strategies to support interdisciplinary practices. To that end, the workgroup developed and disseminated the following draft definition to meeting attendees.

Interdisciplinary practice is a team approach among professionals, consumers, and community partners, applied in the organization and delivery of health services, training, policy, and research. This approach includes:

- *A supportive environment which values and utilizes the skills and expertise of each team member to arrive at outcome-driven joint decisions*
- *Mutual respect among disciplines*
- *Shared leadership, incorporating accountability and responsibility for outcomes.*

Following presentation of an overview of the workgroup process and activities, meeting attendees participated in small groups organized by workgroup and focused on specific questions. Those attending the Interdisciplinary Training and Practices Workgroup session were asked to:

¹ Groups represented on the workgroup include representatives from MCHB, AUCD, and MCH Training Programs (LEAH, LEND, Nutrition, Schools of Public Health, Pediatric Pulmonary Centers, and Nursing)

- Review the proposed definition
- Identify crucial indicators for inter-disciplinary practice
- Describe strategies to be used to collect and report data.

Key Discussion Points

Approximately 30 meeting attendees participated in the discussion group. Discussion began with the identification of what is “good” about the definition with “good” defined as what important aspects are captured in the definition. This discussion was followed by the identification of important aspects that are missing from the draft definition.

- **Important aspects of interdisciplinary practices captured by the draft definition include:**
 - Respect among disciplines
 - Inclusion of consumers and families
 - Shared leadership across disciplines
 - Cross-practice approach: clinical, policy, research
 - Outcome driven focus of interdisciplinary practices
 - Focus on joint decision-making
 - Highlights the use of the skills and expertise of each team member

The brevity of the proposed definition was also viewed as strength.

- **Important aspects of interdisciplinary practices missing from the draft definition include:**
 - Synergy that results from inter-dependence
 - Communication and collaboration are central to interdisciplinary training and practice
 - Teams change over time and this makes the interdisciplinary process dynamic
 - The purpose of interdisciplinary practice
 - The scope misses human services – focused only on health.

The discussion then moved to the identification of critical indicators; that is, how can we recognize interdisciplinary training and practices? Participants struggled with this and felt it was difficult to identify critical indicators given a lack of understanding of the purpose of the indicators. The primary question participants asked was: are these theoretical indicators regarding interdisciplinary training and practice or ones that will ultimately be used as performance measures for the MCH training program?

Depending on the response, the indicators may be different. After some lengthy discussion, the group decided to treat the indicators as potential performance measures, and agreed to the following four broad categories:

- Are students trained to build knowledge and skills in interdisciplinary practice?
- Do students knowledge, skills and self-efficacy increase immediately after the training?
- Are students able to apply their interdisciplinary training in different settings (both in the short and long term)?
- Do the students act as leaders (do they apply their knowledge and skills effectively)?