Overview

The Interprofessional Rural Program of British Columbia (IRPbc) was launched in February 2003 to foster rural recruitment, to advance interprofessional collaboration, and to provide new practice sites for emerging health professionals. Ultimately the goal of the program is to improve the health of people living in rural communities. The IRPbc places teams of students representing a range of health and human services programs into remote/rural and smaller BC communities. The student teams experience the challenges and rewards of rural practice while developing interprofessional and discipline-specific skills across the continuum of care.

The IRPbc is currently working with five interprofessional rural sites – Bella Coola, Hazelton, Hope, Port McNeill, and Trail – one for each of the regional health authorities in BC. By summer 2005, 90 students will have been placed in 17 teams, representing 12 professions: medicine, nursing, social work, pharmacy, physical therapy, occupational therapy, midwifery, speech-language pathology, medical laboratory, audiology, and counseling psychology.

Each of the IRPbc communities has a history of being a practice site for students from health sciences programs including medicine and nursing. However, the IRPbc provides a number of distinct differences from traditional student placements.

The opportunity to teach and learn from students in a wide variety of health disciplines is one that is not usually available, and is unparalleled in my experience. The value of this in assimilating new knowledge and attitudes is tremendous, for the teachers and for the students, and great fun in the doing of it.

– Dr. Granger Avery, Clinical Associate Professor in Family Medicine, UBC, Port McNeill
The IRPbc offers a number of opportunities for rural practitioners and communities:

- **New energy and ideas from the students** – Rural health practitioners report tremendous energy from the student teams – both within the healthcare facility and in the broader community. In particular, IRPbc communities attract strong students who are risk takers, team players, and natural leaders, and who have an interest in the challenges offered through this unique interprofessional rural opportunity.

- **New linkages across rural communities/faculty** – IRPbc students represent professions beyond those traditionally placed in these rural/smaller communities, which means that rural practitioners have opportunity for forging new linkages with a range of educational faculty. There is a number of opportunities for rural practitioners to interact with faculty through site visits and planning forums, as well as ongoing communication through email, telephone, and more. Effort is made through the IRPbc and the respective programs to recognize the preceptor contributions.

- **Expanded education resources for lifelong learning** – Through the IRPbc, rural communities enhance their information technology and library resources, as well as provide training for their health professionals relating to preceptoring and interprofessional collaboration.

- **Rural recruitment** – IRPbc communities have had IRPbc participants return for permanent and locum positions. Many IRPbc students express an interest to return to rural practice either immediately after graduation or after consolidating their skills in a larger setting.

- **Advocates for rural practice** – Many students report being “transformed” through this unique exposure to rural practice. In particular, the interprofessional interaction reinforces the influence of the broader social determinants of health and policies on the health care needs of a community. Many of the students have actively shared their experiences and stories through presentations to their respective schools/programs, journal articles, poster presentations at (inter)professional conferences, media (radio, TV and newspaper).

- **Increased interprofessional collaboration within communities** – IRPbc communities indicate that the students have fostered renewed synergy across professions and organizations in rural communities. Indeed, students have left a legacy in many of the communities ranging from interprofessional hospital discharge forms to enhancements to primary care and chronic disease management initiatives.

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**IRP from a COMMUNITY perspective**

The Interprofessional Rural Program enriched the Hazelton community by exposing us to the skills and interest of the students, and energized our health care providers by allowing them to share their knowledge with students. I am convinced that all of us, communities and students, are richer in many ways because of this program.

– Alice Maitland, Mayor, Hazelton
IRP from a STUDENT perspective

- Exposure to rural life and practice – IRPbc students are exposed to healthcare delivery along the continuum of care from health promotion, primary care, emergency care, acute and chronic care, and more. They have opportunity to interact with a range of other providers in the community and advance their knowledge and skills on many fronts.

- Opportunity to learn together and work as an interprofessional team – Through formal meetings and informal interactions students "learn from, about and with one another," and begin adapt to more collaborative patient-centred practice. They learn to think beyond a single healthcare episode to the broader family and community context.

- Supportive environment – Students are supported in a number of ways, beginning with a two day student orientation where they are exposed to a number of concepts relative to their rural interprofessional placement and meet one another. In addition, students receive travel assistance, a program-specific preceptor, administrative contact, and access to computer and internet.

- New challenges/experiences – Students not only advance their professional and interprofessional skills, but they grow personally through the unique and challenging experiences offered through the respective communities. In particular, students enjoy the outdoor opportunities such as hiking, mountain biking, and sea kayaking.

Thank you for giving me the opportunity to participate in this incredible program. Being part of the IRP program was by far the best educational experience I have had in my six years of university.

– IRPbc Summer '04 participant
IRPbc overview

IRPbc Goals
- Model & evaluate interprofessional learning
- Expand capacity for educating health professionals in BC
- Recruit & retain health professionals in rural communities

Benefits
For students
- Exposure to rural life and practice
- Interprofessional collaboration
- Discipline-specific skills
- Leadership

For rural communities
- Recruitment of health professionals
- Enhanced healthcare services

For rural practitioners
- New energy & ideas
- Linkages with academic facilities
- Enhanced interprofessional collaboration
- Lifelong learning and leadership

IRPbc Implementation Team
- Rural communities
- Post-secondary institutions
- Health authorities
- Ministries of health & advanced education
- Health Match BC
- BCAHC, lead organization

Next Steps
- Sustain existing 5 communities
- Leverage lessons learned across BC and beyond
- Link IRPbc as appropriate with IECPAC initiatives in BC

6 rural community sites
12 health professions
9 PSEs
4 placement phases
17 student teams = 90 IRPbc students

Improved healthcare for BC’s rural communities

February 2003
- Summer 2003
- January 2004
- Summer 2004
- Summer 2005
- 2005/2006