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GUEST EDITORIAL

Changing times in the United Kingdom: The Centre for the Advancement of Interprofessional Education responds to the challenges

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Introduction

Implications are still resonating from high profile inquiries into abuse and neglect at the Mid Staffordshire (Francis Report, 2010) and Winterbourne View Hospitals, driving home the need throughout the United Kingdom to improve collaborative practice and, to that end, interprofessional education (IPE) without which widespread shortcomings in patient care and safety will not be remedied. These challenges coincide with radical reforms led by government regarding the integration of health and social care, the realignment of the workforce to respond more flexibly to the individual, family and community needs, and the commissioning of education and services. Yet local and national co-ordination between the many organisations with the responsibility for interprofessional implementation that are caught up in this maelstrom of change remains ineffective.

The Centre for the Advancement of Interprofessional Education (CAIPE) is responding at two levels. First, by supporting its members in universities and practice as they revise curricula for the next generation across the professions and by strengthening work-based interprofessional learning for those already in practice. Second, by working with the commissioning, educational, professional and regulatory bodies to coordinate policies, priorities, strategies and requirements for the interprofessional education occuring within professional education.

CAIPE officers are meeting frequently with the Health Education England and have led one joint workshop with others to follow. In addition a task group from both the organisations is meeting to develop a constructive partnership. As CAIPE Chair, I serve on the UK Education Inter-regulatory Group and maintain contact with colleagues with NHS Education Scotland, the Higher Education Academy, the Health and Care Professions Council, the General Medical Council and Skills for Health, as well as the National Association of Educators in Practice, the Association of Simulated Practice and the Patient Voices Programme.

Below I outline a range of initiatives and activities that CAIPE is currently undertaking to effectively respond to the significant challenges we are facing in this country.

Developing research

A group, chaired by Scott Reeves in his role as CAIPE Research Advisor, is strengthening our research role. CAIPE is also exploring ways to encourage the active involvement of service users and carers in the planning, implementation and assessment of IPE and to include them in its own deliberations.

Supporting the students

CAIPE works with and through its 400+ pre-/post-qualifying student members locally, nationally and internationally, to help them raise awareness of IPE and CAIPE during presentations at their universities, to develop and improve the style, content and use of their page on the website, to launch the Student Forum, and to liaise with others worldwide including their fellows with the purpose of initiating an IPE network in Arabic countries. Presentation of students' posters enlivens CAIPE AGMs and conferences, two being awarded CAIPE bursaries of £1000 as the winners of the 2014 competition helping them to attend the *All Together Better Health Conference* in Pittsburgh where they presented their posters. Students pay a single fee for CAIPE membership for the duration of their courses and then are subsequently offered a one-year membership at cost price.

Cultivating corporate membership

Recruiting and retaining corporate members (of which there are currently 21) in the present financial climate is a challenge. Meetings biennially of the CAIPE Forum hosted by those members is a much valued opportunity to compare experience in developing IPE and to connect with national and international developments. Recent themes have included ''Evoking care and compassion in professional development'' and ''Broadening IPE Horizons''. Small charities are now encouraged to join CAIPE at a reduced corporate membership charge.

Responding to consultations

CAIPE responds selectively to relevant consultative documents from an interprofessional perspective recently including:

- The Health Care Professions Council on standards of proficiency for paramedics and of proficiency for biomedical scientists and clinical scientists;
- The Health Education Academy on internationalising higher education;
- The General Osteopathic Council consultation on guidance for osteopaths;
- The Academy of Medical Educators on professional standards;
- The Nursing and Midwifery Council on collaborative team and person-centred working.

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Promoting publications

The interprofessional message is reinforced in recent CAIPE publications including the production of a guide for tutors, practice teachers, facilitators, assessors, reviewers and researchers wishing to learn more about IPE (Barr & Low, 2013).

CAIPE has entered into an understanding with the Radcliffe Press for a series of workbooks on aspects of interprofessional working and learning. Three titles have been agreed in the first instance. Others may well follow.

We have received, published and commended a major review conducted by Barr, Helme, and D'Avray (2014) covering the development of pre-qualifying interprofessional education throughout the UK since 1997. The review published in full and in summary, draws together the threads of many recent pre-qualification interprofessional initiatives, national policies and events that may superficially appear to be disparate. Its conclusions present new perspectives, enabling an understanding of IPE at a deeper level elucidating the complex background inspiring future developments. CAIPE has instigated consultations with universities and central institutions to which the recommendations are addressed and will be reporting, in due course, on their progress.

International activities

CAIPE is well represented at conferences convened by its sister networks in Europe (EIPEN and NIPNET) and internationally (ATBH). It supported the formation of the World Coordinating Committee for Interprofessional Education and Practice providing its administrative base with Marion Helme serving as chair and convenor.

CAIPE looks forward to hosting the eighth All Together Better Health Conference (ATBH VIII) in Oxford from 6 to 9 September 2016, in partnership with Oxford Brookes University and the University of Oxford taking Values-Based Practice as the salient theme. Planning for this conference is well underway.

CAIPE members continue to organise and facilitate workshops both internationally and nationally. This is exemplified by a series of recent workshops planned and implemented for universities in Australia and Taiwan.

Rewarding achievements

The first John Horder Award was presented by Dr Elizabeth Horder on behalf of CAIPE and the Royal Society of Medicine, as joint sponsors, to the winning submission from a primary care team demonstrating the best in interprofessional learning and collaborative working. CAIPE will be awarding Fellowships to members who have made significant and outstanding contributions to IPE, collaborative working and the organisation.

Concluding comments

The UK will be on the brink of a general election by the time this issue of the Journal is published. Whatever the outcome, further changes in the organisation and delivery of health and social care will follow at risk of rendering collaboration between professions and between organisations even more difficult but even more necessary. CAIPE will respond to the best of its ability as the authoritative and independent voice for the interprofessional movement that it aspires to lead within the UK, channelling its resources and working in partnership with all who share its ideals and ambitions.

Declaration of interest

The author reports no conflicts of interest. The author was responsible for the writing and content of this paper.

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