

Key Messages

Background und Context

Interprofessional Collaboration (IPC) improves the quality and efficiency of healthcare provision, helping to address some of the healthcare system's growing challenges, including the rise in care complexity and healthcare costs, thereby supporting the goals of the Federal Council's health strategy, Gesundheit2030. Interprofessional education (IPE) is a prerequisite of IPC, as it develops the necessary knowledge, skills, and attitudes for collaborative practice in aspiring and practicing healthcare professionals (HCPs), who participate in IPE in undergraduate and continuing education. A central element of IPE is the development of learners' attitudes, as attitudes guide practice behavior, with positive attitudes associated with a higher motivation to invest in interprofessional exchange, shared decision-making, and patient-centered care. Targeted attitude development, however, receives little attention in current healthcare curricula. In addition, IPE curriculum development and IPE courses in Switzerland lack in visibility, comparability, and coordination across institutions. This presents structural barriers for the continued development of IPE and, by extension, IPC in the healthcare context.

The Issue

We identified three interrelated barriers to IPE and IPC development in the Swiss context:

- The provision of interprofessional education lacks visibility, comparability, and coordination across institutions
- There is a lack of a nation-wide, coordinated and harmonized IPE curriculum
- Insufficient curricular attention is placed on targeting the development and maintenance of positive attitudes toward IPC

Policy Options for Action

Policy option 1: Increase transparency and coordination of IPE offerings

We recommend the publication of a national online directory to increase the visibility of interprofessional education courses, serve as a platform for information exchange among institutions as well as make efficient use of existing educational resources.

Policy option 2: Develop a nationally coordinated interprofessional education curriculum.

We propose that a harmonized curriculum would ensure comparable interprofessional competencies across professions and educational levels and further underscore the high relevance of IPC for practice.

Policy option 3: Explicitly integrate attitude development into IPE

We propose integrating teaching elements into IPE courses that have been shown to contribute to the development of positive attitudes. These include allowing learners to experience how different professions depend on one another and focusing on creating positive interactions and group dynamics in classes.

Implementation Considerations

Barriers to implementation include:

- Inadequate collaboration between educational institutions to develop and coordinate IPE curricula
- Divergent curricular priorities and competing schedule constraints between study programs and institutions
- Cultural barriers within educational and healthcare institutions

Facilitators to implementation include:

- Leverage of existing IPE initiatives to deepen existing collaborations and expand them across more institutions
- Involvement of stakeholders nationwide from education, healthcare organizations, and policy to decide options for increased coordination, harmonization, and further development of IPE curricula
- Laying structural and institutional foundations in IPE curriculum development and teaching to provide resources for targeted attitudinal development