

# Improving care of patients with serious mental illnesses through interprofessional education: an updated literature review

Yeo, C.<sup>1</sup> & Venugopal, S.<sup>2</sup>

<sup>1</sup>Institute of Mental Health, Singapore; <sup>2</sup>UC Davis Medical Center, United States of America

## Introduction and aims

In Singapore, mental disorders account for 7% of total burden of disease and injury (MOH, 2014). To effectively treat mental illnesses and achieve the goal to optimize patient outcomes while maximizing professional resources, interprofessional education (IPE) has been introduced as an effective strategy to get health and social care professionals to collaborate in an effective manner. Interprofessional education has been defined as when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes (WHO, 2010).

The aims of this literature review are to continue the search for evidence of whether interprofessional education can optimize patient outcomes, in particular patient safety, in mental health care. The findings of this systematic review may also identify specific gaps in the evidence informing a future agenda for research, policy and practice in the field of mental health.

## Method

PubMed, Education Resources Information Center, Cumulative Index of Nursing and Allied Health Literature and PsycInfo databases were thoroughly searched using the key words in various combinations “interprofessional education, mental health, patient safety and outcomes.” English-language publications from 2008 to present were included.

## Results

The search identified 88 relevant abstracts, of which 36 full articles were assessed for eligibility based on the inclusion-exclusion criteria. The final number of full articles which assessed the evidence of interprofessional education in mental health settings was 9.

All the studies reported in this current review fell short of demonstrating the impact of IPE in terms of direct benefits to patients. While the aims of the IPE programs were clearly spelt out, they looked into outcomes in varying degrees. More than half of the programs only evaluated outcomes to their participants’ changes in attitudes/ perception and their acquisition of knowledge/ skills of IPE. Two studies tried to look at the impact of the training on changes in organizational practice after the participants returned to their respective organization (Barnes, et al, 2006; Lee, et al, 2013). Hence, more work needs to be done in correlating the impact of IPE and mental health outcomes in particular to direct patient outcomes. In addition, as professional silos continue to be prevalent in settings where patient care is being carried out, there may be a need to bring the various stakeholders together to highlight and address the barriers to collaborative practice by the various professional groups. In an editorial by Cox, Cuff, Brandt, Reeves & Zierler (2016) of a report by the Institute of Health (2015) on building a strong foundation linking IPE to patient and system outcomes, three recommendations were made. The first was the need for purposeful alignment between the education and health delivery systems. The second highlighted the importance of developing and adopting a common conceptual model in order to strengthen the evidence base between IPE and health and system outcomes. The last recommendation discussed the need for better designed studies with detailed information to enable clear links between IPE, collaborative practice, as well as patient, population and health system outcomes.

## Conclusion

When compared with the literature review by Pauze and Reeves (2010), the current review on the impact of IPE in mental health care has found that the overall improvement in research design has been largely maintained while the attempts to measure educational outcomes at more complex levels have been abandoned. Most studies continue to evaluate the effectiveness of IPE in terms of the reactions of learners and stop short of measuring the impact on direct patient outcomes. As the management of mental health conditions often require a biopsychosocial approach, the use of more qualitative approaches together with quantitative measures is likely to help provide a clearer picture of the impact of IPE on patient outcomes. To achieve this result, competent staff, as well as time and resources, will be needed to develop, deliver and evaluate IPE for optimal mental health care (WHO, 2010).

For those interested in the references or share their inputs, please email the first author at [clare\\_yeo@imh.com.sg](mailto:clare_yeo@imh.com.sg)