# The 10th Anniversary WHO Collaborating Centre, Gunma University



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# Congratulatory Message The 10th Anniversary of the WHO Collaboration Centre at Gunma University

#### Keizo Takemi Minister of Health, Labour and Welfare Member of The House of Councillors

Congratulations on the 10th anniversary of the WHO Collaborating Centre for Research and Training on Interprofessional Education at Gunma University.

In July 2013, Gunma University was accredited as a WHO Collaborating Centre (WHO Collaborating Centre for Research and Training on Interprofessional Education). Ten years have passed since I was invited to participate in the symposium commemorating your designation in the following year, 2014. During this period, the environment and priorities surrounding global health have changed dramatically, and the importance of providing quality and safe services through collaboration among many health and medical care professionals has increased even further.

In the first decade of the 21st century, many countries broke the vicious cycle of ill health and poverty. They observed social and economic development by combating conventional infectious diseases like HIV and TB and improving maternal and child health. As a result, the disease structure drastically shifted towards chronic diseases. However, the COVID-19 pandemic revealed that new infectious diseases can significantly threaten an interconnected world.

Japan has been leading global health as the host country of the G7 Summit twice, in 2016 (Ise-Shima) and 2023 (Hiroshima), following the United Nations Sustainable Development Summit in 2015. We have argued that the essential health services required by Universal Health Coverage (UHC) must be extended to everyone to make the world healthier and safer.

The resources needed for this goal are not only financial resources. The human resources involved in healthcare and long-term care are equally important. In Japan, the occupations engaged in healthcare and long-term care are becoming more diverse and specialized. There is a mountain of issues related to human resources, such as the uneven distribution of physicians who support regional healthcare, response to large-scale infectious diseases and disasters, safe healthcare provision through the prevention of medical accidents, and reforms in work styles. If Japan can show a direction for solving these challenges, it will significantly contribute to the countries facing similar challenges in the future.

I understand that the WHO Collaboration Centre at Gunma University has been working with a mission to develop and disseminate to the world, including the Western Pacific region, a multidisciplinary educational program in which various medical professions can understand and help each other. I hope that the Centre will achieve its intended mission and continue to grow to play a role in contributing to Japan's efforts in global health.

#### 群馬大学WHO協力センター設立10周年記念祝辞

厚生労働大臣 参議院議員

武見敬三

群馬大学WHO協力センター設立10周年おめでとうございます。

群馬大学がWHO協力センター(多職種連携教育研究研修センター: WHO Collaborating Centre for Research and Training on Interprofessional Education) としての認定を受け たのは2013年7月。翌年2014年の指定記念シンポジウムにお招き頂いてから10年がたち ました。この間にグローバルヘルスを取り巻く環境も優先課題も大きく変貌して、多くの保 健医療介護職種の方々が連携して良質かつ安全なサービスを提供してゆくことの重要性は更 に高まっています。即ち、21世紀の最初の10年でHIVや結核のような従来型感染症対策と 母子保健対策が前進して多くの国が不健康と貧困の悪循環を断ち切り、社会・経済の発展を 見ることができました。その結果、疾病構造が慢性疾患に大きくシフトするとともに、つな がり合った世界では新たな感染症が大きな脅威となることが、今回のCOVID-19パンデミ ックでも明らかになりました。我が国は、2015年の国連持続可能な開発サミットに引き続 き、2016年(伊勢志摩)、2023年(広島)と二回にわたりG7サミット主催国としてグロ ーバルヘルスを牽引してきました。世界をより健康にそして安全にするためには、ユニバー サル・ヘルス・カバレッジ(UHC)が求める基本的な保健医療サービスを全ての人に広め なければならないと主張してきたのです。その為に必要な資源は財的資源ばかりではありま せん。保健医療や介護に携わる人材も同様に大切な資源となります。我が国でも、保健医 療・介護に関わる職種は多様化し、かつ専門性が高くなるとともに、地域医療を支える医師 の偏在、大規模感染症や災害発生時の対応、医療事故防止による安全な医療提供、働き方改 革など人的資源に関わる課題が山積しています。そして、それらは世界に先駆けて少子高齢 化と人口縮減に直面する先進国日本への挑戦であり、我が国がその解決する方向性を示し得 れば、これから同様な課題に直面するであろう世界の国々への大きな貢献となりましょう。 群馬大学に置かれたWHO協力センターは、様々な医療職種が、お互いを理解し助け合う多 職種連携教育プログラムを開発して西太平洋地域を始めとする世界に発信するミッションを もって活動されてきたと承知しております。センターが所期の目的を達成され、我が国のグ ローバルヘルスへの貢献の一翼を担うべく、発展されてゆくことを期待してやみません。



Jim Campbell
Director, Health Workforce
World Health Organization, Geneva

Congratulations to Gunma University's WHO Collaborating Centre for Research and Training on Interprofessional Education on reaching its 10th anniversary. It has been my pleasure to work with the two globally-recognized leaders in this domain, Professor Hideomi WATANABE (2013-2020) and Professor Hiromitsu SHINOZAKI (2020-onwards) and their multi-disciplinary team of academics, practitioners and scientists.

The Centre has been pivotal in driving the implementation, assessment and continuous review of interprofessional education and practice: documenting outputs, outcomes and results. This is a necessary public good. Around the world we are witnessing a concerted shift towards integrated health and care services, responsive to patient and population needs. Governments are increasingly focused on their stewardship role of a diverse, multi-disciplinary workforce – employed across the public and private sectors – that is competent to deliver the essential public health functions, clinical services, and be prepared for and respond to the next emergency. This requires new models and behaviours, discarding practices that promote occupational segregation, and building teams of health professionals through joint education and practice.

I wish all of the team and its alumni every success, health and happiness in the next 10 years.

#### 世界保健機関 (本部) ヘルス・ワークフォース部長 ジム キャンベル

群馬大学WHO協力センター(多職種連携教育研究研修センター)の設立10周年にあたりお祝い申し上げます。この多職種連携教育(IPE)分野の世界的リーダーである渡邊秀臣教授(2013-2020年)と篠﨑博光教授(2020年以降)、そして学者、実務家、科学者からなる学際的なチームと協力できたことは、私にとって大きな喜びです。

WHO協力センターは、IPEの教育と実践の実施、評価、継続的な見直しを推進する上で極めて重要な役割を担ってきました。これは必要な公共財です。世界中で、患者や住民のニーズに対応した、統合された医療・介護サービスへと協調的にシフトされています。政府は、公衆衛生に不可欠な機能、医療サービスを提供し、次の緊急事態に備え、対応できる能力を備えた、官民を問わず雇用される多様で多分野にまたがる労働力のスチュワードシップの役割にますます重点を置くようになってきています。その為には、新しいモデルと行動が必要であり、職業の分離を促進するような慣習を捨て、共同教育と実践を通じて医療専門家のチームを構築することが必要であります。

次の10年間、チームと卒業生全員の成功と健康、そして幸せをお祈り申し上げます。



Shinjiro Nozaki
Former Senior Advisor for the Chair of Global Health Workforce Alliance (Current Regional Risk Manager in WHO Western Pacific Region)

On this occasion, I would like to extend my heartfelt congratulations on the 10th anniversary of Gunma University's Graduate School of Health Sciences' Centre for Research and Training for Interprofessional Education. Since its establishment, your centre has been designated as a WHO Collaboration Centre and has become a pioneering presence in interprofessional education and collaborative research in the Asia-Pacific region.

Your centre has carried out many activities, particularly in collecting evidence on the effectiveness of interprofessional education and collaboration. This includes conducting systematic literature reviews and verification of the effects, organizing interprofessional education workshops in cooperation with the education development centres of member countries in the Western Pacific region under the coordination of WHO, and offering training courses for educators and health care professionals. Notably, your centre has played a crucial role in gathering evidence on the effectiveness of interprofessional collaboration and disseminating these findings globally through numerous publications. Additionally, spreading these achievements across Asian countries has been of great importance. Your centre has collaborated with countries like Indonesia, Thailand, South Korea, Laos, and the Philippines to conduct seminars and workshops, significantly contributing to the advancement of interprofessional education in these nations.

In October last year, a new framework for health workforce development was presented at the WHO Western Pacific Regional Committee. The issue of health workforce has been recognized for its importance and urgency since its resolution at the WHO General Assembly in 2006, leading to the formation of the Global Health Workforce Alliance, with Japan as a key member in its establishment and promotion. The core challenges in global health workforce issues include the shortage of personnel, migration from low and middle-income countries to high-income countries, and the lack of continuous skill and information updating. In the 2006 resolution, 57 countries were identified as HRH crisis countries. WHO, in cooperation with the Global Health Workforce Alliance, has supported these crisis countries in developing long-term national workforce plans and has established the WHO Global Code of Practice on International Recruitment of Health Personnel, raising alarms about the migration from lower to higher-income countries, but the situation has not changed much.

One major reason is the delay in workforce development in low and middle-income countries and the impact of COVID-19. It takes a long time to develop a workforce in these countries, and sustained support is essential, but it has been challenging. Meanwhile, the COVID-19 pandemic has indeed brought attention to health workforce issues. During this time, interprofessional collaboration gained prominence as a strategy to address the shortage of health professionals, a problem not limited to low and middle-income countries but also notable in high-income countries. Without a doubt, the knowledge and experience accumulated by your centre over the years have garnered significant attention.

We do not know when the world might face another experience like COVID-19. It is crucial to advance and prepare for interprofessional collaboration for the next opportunity. In light of this, I look forward to your centre's continued success and growth. Congratulations again on your 10th anniversary.

#### 元世界保健医療人材連合議長顧問 野 崎 慎仁郎

(現WHO西太平洋地域事務局危機管理官)

この度は群馬大学大学院保健学研究科の多職種連携教育研究研修センターが10周年を迎えられたとのこと、誠におめでとうございます。

貴センターは設置当初から我々WHOのコラボレーションセンターに認定され、アジア太平洋地域における多職種連携研究の先駆的存在となってこられました。

貴センターは多職種連携教育・協働の効果に対するエビデンスの収集、系統的文献調査により多職種連携教育・協働の効果の検証の実施、WHOの調整のもと、西太平洋地区加盟国の教育開発センターと協力して多職種連携教育ワークショップを開催、教育者ならびに保健医療関係者に対する研修コースの開催など、多くの活動を実施されて来ましたが、特に多職種連携教育・協働の効果に対するエビデンスの収集をされ、多くの論文にまとめられ、その知見を世界に発信するという極めて重要な役割を果たされて来ました。また、その成果をアジア地域の各国に普及する役割も極めて重要でした。貴センターはインドネシア、タイ、韓国、ラオス、フィリピンなどの国々と協力してセミナーやワークショップを開催され、貴学の研究成果や研修プログラムを通じて、各国の多職種連携教育の推進に大いに貢献されています。

昨年10月のWHO西太平洋地域委員会において、新しい保健医療人材開発のフレームワークが示されました。

保健医療人材課題は2006年にWHO総会でその重要性や緊急性について決議されて、世界保健医療人材連合というパートナーシップも生まれました。日本もその設立提案と推進の主要メンバーでした。世界保健医療人材課題の中心は、人材の量の不足、低中所得国から高所得国への人材の流出、継続的なスキルや情報のアップデートの不足などでした。2006年の決議では57の保健医療人材危機国も指定されました。WHOは世界保健医療人材連合と協力して、危機国における中長期的な国家的な人材育成計画の策定を支援したり、WHO Global Code of Practice on International Recruitment of Health Personnelを策定し、低中所得国から高所得国への流出に警鐘を鳴らしてきましたが、情勢はあまり変わっていないのが現実です。

その大きな理由は低中所得国での人材育成の遅延とコロナの影響です。低中所得国の人材育成には長い時間がかかります。息の長い支援が必須ですが、苦労しています。一方で、コロナ禍で保健医療人材課題に脚光が当たったのも事実です。その中で注目されたことは多職種連携でした。コロナ禍で保健医療人材の不足が低中所得国のみの問題ではなくなり、高所得国においても注目され、その人材不足を補う方策として、多職種連携が注目されたのです。まぎれもなく、貴センターが長年積み重ねてこられたこれまでの知見が注目されることとなったのです。

世界はいつまた何時、コロナのような経験をするか、分かりません。次の機会に向けて多職種連携を進め、備えることが重要です。そのためにも、貴センターの益々のご健闘に期待する次第であります。10周年誠におめでとうございました。



Yasuki Ishizaki President of Gunma University

With sophistication and specialization of modern healthcare, teamwork is essential among many medical professions, including doctors, nurses, pharmacists, medical technologists, physiotherapists, and occupational therapists, to provide safe and good-quality healthcare. Individual abilities are indispensable for such safe and high-quality healthcare. Excellent individual skills alone, however, are never enough to provide safe and high-quality medical care. Healthcare workers, who are professionals in various fields, must expertly divide their roles and design optimal treatment for each patient while liaising with one another. The Centre for Research and Training on Interprofessional Education, established to achieve this goal, was designated as a WHO Collaborating Centre in July 2013, and it marked its 10th anniversary in July 2023.

During this time, the Centre organized IPE (Interprofessional Education) Training Courses, JIPWEN (Japan Interprofessional Working and Education Network) symposiums, international public symposiums, and World Patient Safety Day events, and it strengthened cooperation with relevant organizations and universities not only in Japan, but also abroad, such as in Thailand, Lao PDR, Viet Nam, Korea, Indonesia, and China. Furthermore, the Centre conducted research on IPE and published its findings in a number of peer-reviewed journals. In recognition of these achievements of the Centre, as well as those of Departments of Healthcare Quality and Safety at Gunma University Graduate School of Medicine and Gunma University Hospital, the Patient Safety Education Center for Multiprofessionals (PSEC) at Gunma University was selected as a Joint Usage Education Center by the Minister of Education, Culture, Sports, Science, and Technology in July 2023. Under the Joint Usage Education Center certification system, the Minister selects a hub university from among universities nationwide as a base so that tertiary education as a whole can develop diverse and advanced education by promoting the shared use of human and physical resources that individual universities possess in order to meet the needs of diversifying society and students and provide quality education.

I sincerely hope that, in collaboration with the newly established Patient Safety Education Center for Multiprofessionals (PSEC), the WHO Collaborating Centre for Research and Training on Interprofessional Education will maintain and strengthen its contribution to Goal 3 of the 17 Sustainable Development Goals (SDGs), "Ensure healthy lives and promote well-being for all at all ages," declared by the United Nations Summit in 2015.

I request your continued support and cooperation both at home and abroad.

#### #馬大学長 **石 崎 泰 樹**

現代の医療は高度化と専門化が進み、安全性の高い良質な医療を提供するためには、医師、看護師、薬剤師、臨床検査技師、理学療法士、作業療法士など多くの職種の医療人のチームワークが非常に大切です。安全で良質な医療を提供するためには、個々の技量が優れていなければ話になりません。しかし個々の技量が優れているだけでは、決して安全で良質な医療を提供できません。多様な分野でのプロフェッショナルである医療人が相互に連絡をとりながら上手に役割を分担し、患者さん一人一人にとって最適の医療をデザインすることが必要です。この目的のために設立された群馬大学の多職種連携教育研究研修センターは2013年7月にWHO協力センター「多職種連携教育研究研修センター(WHO Collaborating Centre for Research and Training on Interprofessional Education)」の指定を受け、2023年7月に10周年を迎えました。

この間、本センターは定期的にIPE(Interprofessional Education)トレーニングコース、JIPWEN(Japanese Interprofessional Working and Education Network)シンポジウム、公開国際シンポジウム、世界患者安全の日関連イベント等を開催し、国内のみならず、タイ、ラオス、ベトナム、韓国、インドネシア、中国等、海外の関係諸機関・大学との連携を強化してきました。またIPEに関する研究を進め、成果を多数論文に発表してきました。本センターのこのような実績と、医学系研究科の医療の質・安全学講座、医学部附属病院の医療の質・安全管理部の実績が評価され、2023年7月、本学の多職種人材育成のための医療安全教育センターが、文部科学大臣から「教育関係共同利用拠点」に認定されました。「教育関係共同利用拠点」の認定制度は、多様化する社会と学生のニーズに応えつつ質の高い教育を提供していくため、各大学の有する人的・物的資源の共同利用等を推進することで、大学教育全体として多様かつ高度な教育を展開していくために、文部科学大臣が全国の大学から活動の拠点となる大学を認定するものです。

本センターが、今後、新たに設置された多職種人材育成のための患者安全教育センターと手を携え、国連サミットが2015年に持続可能な開発目標(Sustainable Development Goals: SDGs)として掲げた17のゴールのうち、第3のゴール「すべての人に健康と福祉を」への貢献を維持・強化することを願っています。

国内外の皆様方の更なるご支援・ご協力をお願い申し上げます。



**Takayuki Saitoh**Dean, The Graduate School of Health Sciences, Gunma University

For the past 10 years, the WHO Collaborating Centre at Gunma University has been a pioneer in the field of interprofessional education in the Asia-Pacific region. The centre's efforts have played a valuable role in collecting and disseminating to the world important evidence on the effectiveness of interprofessional education (IPE) and collaborative practice (CP). In particular, the activities focusing on human resource development in Asia have contributed significantly to the development of IPE in various countries. The healthcare human resource challenges that the world faces are constantly changing. In particular, the outbreak of the new coronavirus has made the challenges more pronounced. However, it has also brought attention to collaboration and reaffirmed its importance. I believe that the centre's longstanding efforts will provide valuable guidance for humanity's challenges in the future. IPE and CP are increasingly essential to improve the quality and safety of health care. The Graduate School of Health Sciences at Gunma University sincerely hopes that the centre will continue to fulfill its role and contribute to the health and welfare of the world.

Finally, congratulations on your 10th anniversary. We sincerely wish you continued success in your future endeavors.

#### 群馬大学WHO協力センター設立10周年を記念して

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群馬大学WHO協力センターの設立10周年、心よりお祝い申し上げます。

この10年間、群馬大学多職種連携教育研究研修センターは、WHO協力センターとして、アジア太平洋地域における多職種連携研究の先駆的存在として活躍されてきました。貴センターの取り組みは、多職種連携教育(IPE)・多職種協働(CP)の効果に関する重要なエビデンスを収集し、世界に発信するという貴重な役割を果たしてきました。特に、アジアでの人材育成に焦点を当てた活動は、各国の多職種連携教育開発に大きく貢献しています。

世界が直面する保健医療人材の課題は、常に変化し続けています。特に、新型コロナウイルスの流行は、その課題をより顕著にしました。しかし、その中で多職種連携が注目され、その重要性が再認識されました。貴センターの長年の取り組みは、今後の人類が挑戦する課題に対しても貴重な指針となると考えます。未来に向けて、保健医療の質と安全性を高めるためには、ますます多職種連携が不可欠です。群馬大学大学院保健学研究科は貴センターが、これからもその役割を果たし続け、世界の健康と福祉に貢献していくことを心から期待しています。群馬大学大学院保健学研究科は貴センターと共に人類の福祉に貢献致します。

最後に、10周年を誠におめでとうございます。今後のご活躍を心よりお祈り申し上げます。



### Congratulations on the 10<sup>th</sup> Anniversary of Gunma University WHO Collaborating Centre

#### Hideomi Watanabe

Vice President, Takasaki University of Health and Welfare Advisor, Gunma University WHO Collaborating Centre

In December 2008, Gunma University visited WHO for the first time, created an action plan, and began collaborative activities. With the results, Gunma University was designated as a WHO Collaborating Centre (WHO CC) in July 2013. Since Gunma University was designated, the Director is the President of Gunma University. The foundation of the entrusted mission (TOR) when the centre was first designated is still being inherited even after the third re-designation. The main activities are promoting and disseminating interprofessional education (IPE) at international conferences, promoting research activities for evidence creation, and holding training courses and workshops both domestically and internationally. One of the achievements was that IPE was positioned as one of the 11 recommended items in the medical and health profession education guidelines "Transforming and scaling up health professionals' education and training: WHO Guidelines 2013" published by WHO in 2013. The TORs could be actively promoted thanks to the warm support of WHO Headquarters (WHO HQ), the Western Pacific Regional Office (WHO WPRO), the Ministry of Health, Labour and Welfare, JICA, and others. In particular, when the promotion of patient safety was pointed out as a challenge for Gunma University, whose reputation fell to the ground due to medical accidents at the Gunma University Hospital in November 2014, the WHO CC was supported by various parties, which led to the restoration of trust. Gunma University's WHO CC activities have become focused on patient safety as one of the targets of IPE since then. Currently, I am working to enhance IPE with young faculty members at Takasaki University of Health and Welfare, where I was transferred in 2020. In most universities for medical and health professions, a course on "IPE" has been established. We are in a new era where we need to shift the course content from gathering students of various occupations in one place for discussion to helping them in understanding and acquiring a collaborative mindset as a result of IPE. In the future, I hope that the WHO CC will be an effective global leader and become even more engaged in developing IPE to achieve "Universal Health Coverage: UHC," WHO's health strategy.

#### WHO Collaborating Centre の活動10周年を記念して

高崎健康福祉大学 副学長 群馬大学多職種連携教育研究研修センター 顧問

渡邊秀臣

2008年12月に初めてWHOを訪問しAction-planを立てて協同活動を始め、その成果を もって群馬大学がWHO Collaborating Centre (WHO CC)に指定されたのは、2013年 7月でした。指定は群馬大学になされたものですのでDirectorは群馬大学長です。初めて 指定された時の委託事項(TOR)の基盤は3回目に再指定された現在も引き継がれていま す。主に、国際会議等での多職種連携教育(IPE)の啓発と普及、Evidence 作りの研究活 動の推進、国内外でのトレーニングコース・ワークショップの開催です。一つの成果として、 2013年にWHOから発刊された医療・保健職教育のガイドライン「Transforming and scaling up health professionals' education and training: WHO Guidelines 2013] の11推奨項目の一つにIPEが位置付けられたことが挙げられます。これらが積極的に推進す ることができたのも、WHO本部(WHO HQ)や西太平洋地域事務局(WHO WPRO) 厚生労働省、JICA等の温かいご支援があったからです。特に、2014年11月に群馬大学医 学部附属病院の医療事故報道で地に落ちた群馬大学の課題としてチーム医療の推進が指摘 される中、本WHO CCを多方面から支援していただき信頼回復に結びつけましたことには 深く感謝しております。群馬大学のWHO CCの活動もこれを契機にIPEの一つの対象とし て患者安全に重点を置くようになりました。現在、私個人は2020年に異動しました高崎健 康福祉大学で若手の教員とIPEの充実に励んでいます。ほとんどの医療・保健職の大学では 「チーム医療」の科目が開設されています。IPEもただ多職種を学ぶ学生が一か所に集まっ て話し合うというプロセスから、内容の充実により連携マインドの理解、習得というアウト カムが求められる時代となっています。今後、WHOの保健戦略である「Universal Health Coverage: UHC」達成に向けてIPEをより有効にする開発リーダーとして益々の国際的な 活躍を期待しています。



#### Greeting

Hiromitsu Shinozaki
Head, Centre for Research and Training on Interprofessional Education,
Gunma University

The situation surrounding healthcare is changing due to the aging population, changes in disease structures, and shifts in the global environment. Healthcare is becoming increasingly diversified, segmented, and specialized. Collaborative practice (CP) is crucial for modern healthcare. In addition to profession-specific education, interprofessional education (IPE), where students of different professionals learn together, is essential for developing healthcare professionals capable of addressing the diverse needs of the modern world.

Gunma University has expanded its IPE initiatives to a global scale, building on past efforts. In recognition of these achievements, Gunma University was designated as a WHO Collaborating Centre specializing in IPE in July 2013. The Centre's main activities include: 1) disseminating and promoting IPE, 2) generating and collecting evidence on the effectiveness of IPE, and 3) providing training programs for educational institutions and healthcare facilities overseas, particularly in Asian countries. These activities are carried out under the guidance of WHO, in collaboration with relevant ministries and agencies in each country, JICA, and the Japan Interprofessional Education Network (JIPWEN). Additionally, the Centre is actively involved in addressing the crucial issue of patient safety within the context of IPE and CP. Our efforts encompass the dissemination, education, and research of patient safety, reinforcing the significance of this aspect in our broader initiatives.

Our WHO Collaborating Centre was re-designated in 2017 and 2021, celebrating its 10th anniversary in July 2023. We extend our heartfelt gratitude for the tremendous support and cooperation provided by all related organizations.

Our aim is to promote IPE activities and contribute to achieving Universal Health Coverage (UHC) globally and meeting the Sustainable Development Goals (SDGs) by developing healthcare professionals proficient in modern CP. We eagerly anticipate your ongoing support and cooperation.

#### ご挨拶

#### 群馬大学 多職種連携教育研究研修センター長 篠 崎 博 光

人口の高齢化、疾病構造の変化、地球環境の変化など、保健医療を取り巻く状況は変化し、保健医療は多様化ならびに細分化・専門化が進んでいます。現代の保健医療を行う上で多職種協働は必要不可欠です。また、現代の多様なニーズに対応できる保健医療人材の育成には、それぞれの専門職の教育に加え、それぞれの職種・専攻が共に学ぶ多職種連携教育が必要です。

群馬大学はこれまで行ってきた多職種連携教育の取り組みを基盤に、多職種連携教育の活動をよりグローバルに展開しました。これらの成果をもとに、本学は2013年7月に多職種連携教育に特化したWHO協力センターに指定されました。当センターの主な取り組みは、1. 多職種連携教育の普及啓発、2. 多職種連携教育の効果に関するエビデンスの創出・収集、3. 海外、特にアジア諸国の教育機関ならびに保健医療施設に対しての研修の提供です。これらの活動はWHOの指導のもと、各国の関係省庁やJICAさらには日本インタープロフェッショナル教育機関ネットワーク(JIPWEN)や協力のもと行って参りました。さらに、患者安全は多職種協働/多職種連携教育上で極めて重要な課題であり、患者安全に関してもその普及・啓蒙、研究について取り組んでまいりました。

本学WHO協力センターは、2017年と2021年に再指定を受け、2023年7月に10周年を迎えることができました。これまで関係各機関の皆様には多大なるご支援・ご協力をいただきました。改めてお礼申し上げます。

当センターは、今後も多職種連携教育の活動を促進し、現代の多様化ならびに細分化・専門化した保健医療職の育成を通して、グローバルレベルでのユニバーサル・ヘルス・カバレッジ(UHC)の実現に貢献し、持続可能な開発目標(SDGs)の達成に貢献したいと考えております。引き続きご支援・ご協力の程、よろしくお願い申し上げます。



**Akinori Kama**Advisor, Gunma University WHO Collaborating Centre

In March 2016, I was assigned by the WHO Collaborating Centre for Interprofessional Education and Research (JPN89) at Gunma University to strengthen collaboration among the World Health Organization, the Ministry of Health, Labour and Welfare, and related organizations. The world has changed significantly in the ten years since the centre was established. The most significant of these changes was the COVID-19 pandemic that engulfed the world, and even today, we have not entirely escaped from the horrors of that pandemic.

Although the new virus infection confused Japan, we overcame the difficulties better than in other countries. There were many factors, but the most significant was that the essential practices of wearing masks, gargling, and washing hands had taken root in Japan. This was because basic public health practices, such as hand washing, were taught in school education and incorporated into daily life habits.

COVID-19 was classified as a Category 5 infectious disease under the Law Concerning Prevention of Infectious Diseases and Medical Care for Patients with Infectious Diseases (Infectious Disease Control Law). However, it is still evolving and is a problem in many countries. 2023 saw Mpox (monkeypox) outbreaks, diphtheria, dengue, and western equine encephalitis, but damage can be minimized by taking appropriate public health measures daily.

IPE is a modest field of study, but it has been used to significantly affect patient safety through daily learning and training and in emergencies such as this one. With your help, we overcame a difficult situation when there were whispers of hospital collapse. However, the significant challenges are spreading IPE widely and promoting IPE research in each country due to the differences in history, culture, religion, political background, and unique medical education systems.

The WHO Collaborating Centre at Gunma University has organized IPE training courses for educators and health professionals and established the Asia-Pacific IPE Research Alliance (AIR Alliance) with the participating institutions. We will continue contributing to the dissemination of IPE and the promotion of IPE research in cooperation with IPE research institutions in the Asian region.

#### 群馬大学WHO協力センター 顧問

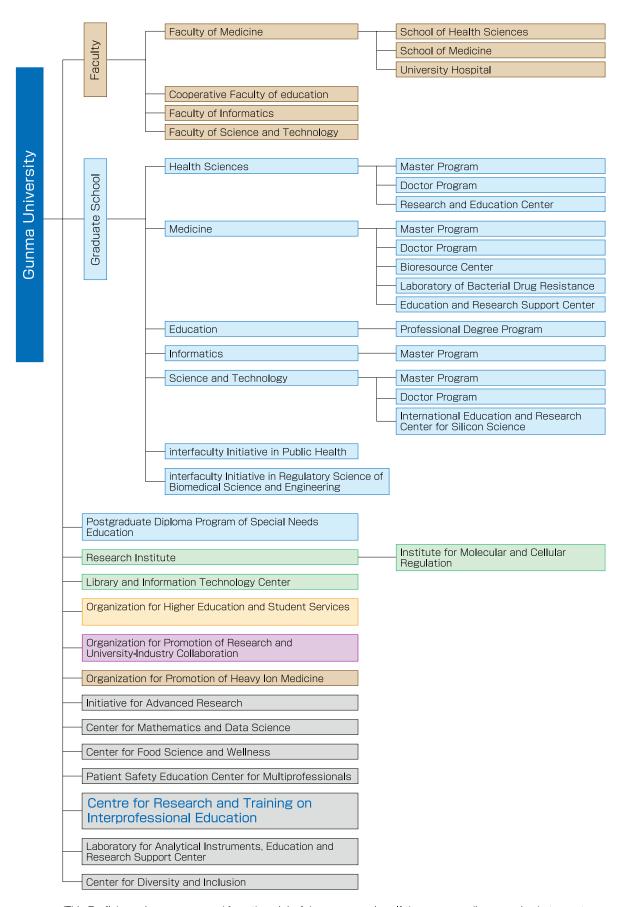
#### 特別教授 蒲 章 則

2016年3月に群馬大学WHO協力センター(多職種連携教育研究研修センター: JPN-89)に招かれて世界保健機関、厚生労働省、及び関連機関の連携強化を行ってきました。当センター設立以来の10年の間に世界情勢が大きく変化を遂げました。その中で一番の出来事は世界中を巻き込んだCOVID-19パンデミックであり、現在もその恐怖から完全に抜け出ておりません。

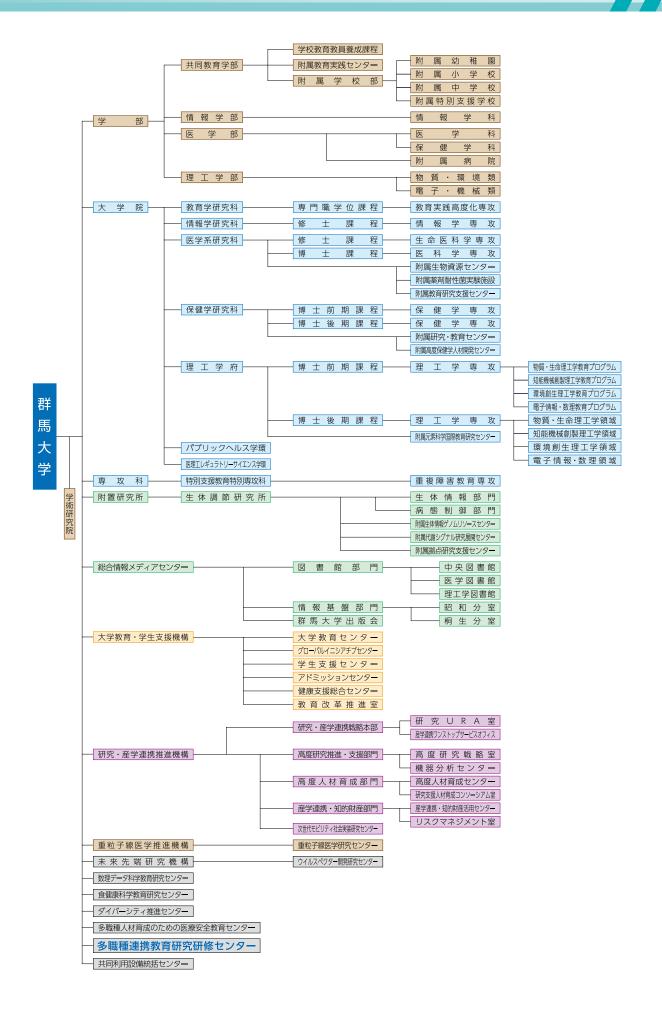
新型ウイルス感染症で国内は混乱しましたが、海外と比較して上手に難局を乗り越えることができました。いろいろ要因がありますが、最大の要因は日本ではマスクの着用、うがい、手洗いという基本的慣習が根付いていたことにあります。学校教育で公衆衛生の基礎である手洗い等の保健を学び、それが日常の生活習慣に取り入れているという背景があったからです。COVID-19は感染症の予防及び感染症の患者に対する医療に関する法律(感染症法)上の5類感染症に位置付けられましたが、現在も進化をしており各国で問題になっています。2023年はサル痘(Mpox)、ジフテリア(Diphtheria)、デング(Dengue)、西部ウマ脳炎(Western equine encephalitis)が流行していますが、日頃の適切な公衆衛生的対応をしていれば被害を最小限に抑えることができます。

多職種連携教育(IPE)は地味な学問領域でありますが、日頃の学習・トレーニングで患者安全、今回のような緊急時の対応で大いに発揮され、病院崩壊と囁かれた難局を皆さんの力で乗り切ることができました。IPEは世界各国に広がりつつあり、その重要性が広がりつつありますが、各国の歴史・文化・宗教・政治的背景及び独自の医学教育システム制度が異なる為、どのようにIPEを幅広く浸透させてゆくか、またIPEの研究を促進することが大きな課題となっています。

群馬大学WHO協力センターは、教育者ならびに保健医療関係者に対するIPE研修コースを開催しており、参加された機関と連携リーグ(AIR Alliance: Asia-Pacific IPE Research Alliance)を設立しました。今後、アジア地域のIPE研究機関と連携してIPEの普及と研究の促進に寄与してゆく所存です。



(This English version was prepared from the original Japanese version. If there are any discrepancies between two, the Japanese version takes precedence.)



#### [Educational Philosophy]

Interprofessional education (IPE) is an educational approach that provides opportunities for professionals from different occupations and specialized fields to collaborate and learn together. This allows for the interaction of diverse perspectives and skills, enabling comprehensive and effective problem-solving and delivery of care. The centre is committed to introducing IPE, aiming to cultivate professionals in healthcare and welfare for the 21st century who not only possess advanced specialized knowledge and skills but also have a solid ethical foundation and collaborative practice capabilities.

#### 【教育理念】

多職種連携教育とは、異なる職種や専門分野のプロフェッショナルが協力・連携して学ぶ機会を提供する教育アプローチです。これにより、異なる視点やスキルが相互作用し、総合的で効果的な問題解決やケアの提供が可能になるという利点があります。本センターは、多職種連携教育の普及を通して、高度な専門知識と技術のみならず確固たる倫理観と連携実践力をもった、21世紀で求められる保健医療福祉の担い手の育成に取り組んでいます。

# Gunma University WHO Collaborating Centre Milestones

December 2008	Commencement of visits to the World Health Organization (WHO).  Development of an Action Plan and initiation of collaborative activities.
2010	Implementation of a 6-month training program at WHO as part of the Global Health Scholar Program.
July 22, 2013	Designation as the WHO Collaborating Centre for Research and Training on Interprofessional Education.
August 2013	The first Interprofessional Education (IPE) Training Course to be continued annually to the present
July 15, 2014	Commemorative symposium for the designation of Gunma University as the WHO Collaborating Centre.
September 13, 2016	Public symposium with a featured speaker from the Health Labour Market Unit, the Health Workforce Department, World Health Organization.
July 22, 2017	Re-designation of a WHO Collaborating Centre for a second term.
April 24-25, 2018	International symposium with participants in the Patient Safety Global Ministerial Summit 2018 as featured speakers.
September 17, 2019	Gunma Prefecture Medical Safety Training with Director of the Medical Policy Division at the Ministry of Health, Labour and Welfare official as a guest speaker (WHO designated September 17 as World Patient Safety Day in 2019.)
September 2020	Initiation of the World Patient Safety Day Illumination Project.
July 22, 2021	Re-designation of a WHO Collaborating Centre for a third term.
March 2022	Establishment of the Asia-Pacific IPE Research Alliance (AIR Alliance) to promote research, education, and personnel exchange in IPE in the Asia-Pacific region.
September 4-7, 2023	Co-host of Interprofessional Education Training Course in Thailand with multiple entities including JICA.

#### Outline of Activities: Terms of Reference

[TOR1] To support WHO for the collection and dissemination of the evidence base of interprofessional education (IPE) in the context of health profession education reforms at both global and regional levels to progress towards the UN Sustainable Development Goals.

Activity 1 Under WHO's leadership, support WHO in the translation and dissemination of WHO tools and materials on IPE.

[TOR2] Under WHO's leadership, to conduct collaborative research and develop evidence on the outcomes of IPE with an emphasis on producing a competent health workforce for Universal Health Coverage and to progress towards the UN Sustainable Development Goals.

Activity 2 Under WHO's leadership, support WHO in collecting evidence for the effect of IPE on attitudes of learners toward IPE and Collaborative Practice.

[TOR3] Upon WHO's request, to provide IPE training courses in collaboration with other WHO CCS to expand educational capacity to implement integrated community-based, people-centered services and public health functions.

Activity 3 Under WHO's leadership, support WHO in building capacity on IPE through conducting training workshops.

#### 活動概要:WHOとの取り決め事項

【TOR1】 国連の持続可能な開発目標を推進するため、WHOの世界および地域レベルの保健専門職教育改革に関連した多職種連携教育(IPE)のエビデンスの収集と普及を支援する。

活動1 WHOのリーダーシップの下、IPEに関するWHOのツールや資料の翻訳と普及を支援する。

【TOR2】 WHOのリーダーシップの下、国連のSDGsを推進し、ユニバーサル・ヘルス・カバレッジ (UHC)のための有能な保健医療人材の育成に重点を置き、共同研究を実施しIPEの成果に関するエビデンスを明らかにする。

活動2 WHOのリーダーシップの下、IPEが学修者のIPEやCP(多職種協働)に対する態度に及ぼす効果に関するWHOのエビデンス収集を支援する。

【TOR3】 WHOからの要請に基づき、地域に根差した住民中心の統合サービスや公衆衛生活動を実施する教育能力の拡充を支援するため、他のWHO協力センターと連携しIPEトレーニングコースを提供する。

活動3 WHOのリーダーシップの下、トレーニング・ワークショップの実施を通じて、WHOのIPEに関する能力向上を支援する。

#### Professionals' Education and Training

World Health Organization Guidelines 2013, clearly listed interprofessional education (IPE) as one of the eleven recommendations. However, insufficient evidence for the effects of IPE on health issues was also pointed out. To disseminate IPE under the WHO HRH Policy to scale up and transform health profession education, evidence for concrete effects of IPE programs on learners' attitudes toward the needs of the people and eventually higher quality of the stakeholders must be acquired. To improve the health system attributes of quality and efficiency, for UHC, stated in Universal Health Coverage: Moving Towards Better Health, WHO/WPRO 2015, careful scientific research needs to be promoted.

#### 専門職の教育とトレーニング

世界保健機関(WHO)のガイドライン2013では、11の推奨事項の一つとして専門職間教育(IPE)が明記されている。しかし、IPEが健康問題に及ぼす効果についてのエビデンスが不十分であることも指摘されていた。WHOのHRHポリシーの下でIPEを普及させ、保健専門職教育をスケールアップさせ、変革していくためには、IPEプログラムが学習者の人々のニーズに対する姿勢、ひいては関係者の質の向上に具体的な効果をもたらすエビデンスを獲得する必要がある。ユニバーサル・ヘルス・カバレッジで述べられているように、UHCのために、質と効率という保健システムの特性を改善する: Moving Towards Better Health, WHO/WPRO 2015にあるように、UHCに向けて、質と効率という保健システムの特性を向上させるためには、入念な科学的研究を推進する必要がある。

#### List of Articles in English

- 1) Haruta J, et al. Factors associated with interprofessional competencies among healthcare professionals in Japan. J Interprof Care. 2023; 37(3):473-479.
- 2) Haruta J, et al. How do medical students learn in an online community diagnostics program? BMC Med Educ. 2023; 23(1):15.
- 3) Komatsu H, et al. The Role of Nurse on the Treatment Decision Support for Older People with Cancer: A Systematic Review. Healthcare (Basel). 2023;11(4):546.
- 4) Masumoto S, et al. Association between experience of interprofessional care and self-medication among family caregivers: A cross-sectional study. Res Social Adm Pharm. 2023; 19(5):773-777.
- 5) Ozone S, et al. Three-year evaluation of a program teaching social determinants of health in communitybased medical education: a general inductive approach for qualitative data analysis. BMC Med Educ. 2023; 23(1):332.
- 6) Goto R, et al. Current status of interprofessional competency among healthcare professions in Japan: A cross-sectional web-based survey. J Gen Fam Med. 2022; 24(2):119-125.
- 7) Haruta J, et al. Analyzing annual changes in network structures of a social media application-based information-sharing system in a Japanese community. BMC Health Serv Res. 2022; 22(1):1107.
- 8) Haruta J, et al. How do general practitioners handle complexities? A team ethnographic

- study in Japan: BMC Primary Care, 2022; 23(1):133.
- 9) Ito Y, et al. Implementing interprofessional education (IPE) in nursing schools: Survey on status and issues prior to rule revision: The Journal of Interprofessional Collaboration in Health and Social Care, 2022; 15(1):2-10.
- 10) Kawamura H, et al. Implementation of a rapid response system at an isolated radiotherapy facility through simulation training. BMJ Open Quality. 2022;11: e001578.
- 11) Nagai S, et al. A Longitudinal Study of the Impact of Personal and Professional Resources on Nurses' Work Engagement: A Comparison of Early-Career and Mid-Later-Career Nurses. Healthcare (Basel). 2022; (1):76.
- 12) Nakayama G, et al. Family caregivers' experience with healthcare and social care professionals and their participation in health checkups: A cross sectional study in Japan. J Gen Fam Med. 2022; 24(2):110-118.
- 13) Shikino K, et al. Effective situation-based delirium simulation training using flipped classroom approach to improve interprofessional collaborative practice competency: a mixed-methods study. BMC Med Educ. 2022; 22(1):408.
- 14) Wakabayashi T, et al. Self-assessment scale for the community-based and emergency practice. BMC Med Educ. 2022; 22(1):799.
- 15) Yamamoto Y, et al. What kinds of work do Japanese primary care physicians who derive greater positive meaning from work engage in? A cross-sectional study. J Gen Fam Med. 2022; 24(2):94-101.
- 16) Haruta J, et al. Development of a Japanese version of the Self-assessment Scale of Interprofessional Competency (JASSIC): Journal of Interprofessional Care, 2021; 6:1-8.
- 17) Haruta J, et al. Exploring Barriers and Benefits of Implementing Interprofessional Education at Higher Health Professions Education Institutions in Japan: Journal of Allied Health, 2021; 50(2):97-103.
- 18) Haruta J, et al. Validation of the professional self-identity questionnaire for medical students during clinical practice in Japan: International Journal of Medical Education, 2021; 12: 160-165.
- 19) Haruta J, et al. What Role Conceptions Do Multi-Healthcare Professionals Have of Physicians and What Role Expectation Do They Have of Physicians in a Community?: BMC Family Practice, 2021; 22(1):217.
- 20) Kondo K, et al. Effects of a nurse-occupational therapist meeting on function and motivation in hospitalized elderly patients: A pilot randomized control trial: British Journal of Occupational Therapy, 2021; 84(10): 620-627.
- 21) Nozaki S, et al. First-year Medical Students' Attitudes toward Health Care Teams: A Comparison of Two Universities Implementing IPE Programs. The Kitakanto Medical Journal, 2021; 71(2):115-121.
- 22) O' carroll V, et al. Top tips for interprofessional education and collaborative practice research: a guide for students and early career researchers. 2021; 328-333.
- 23) Yamamoto T, et al. Exploring Barriers and Benefits of Implementing Interprofessional Education at Higher Health Professions Education Institutions in Japan. Journal of Allied Health, 2021; 50(2):97-103.
- 24) Hamada S, et al. Effectiveness of an interprofessional education program using team-based learning for medical students: A randomized controlled trial. Journal of general and family medicine, 2020; 21(1):2-9.
- 25) Sy M, et al. Articulating the form, function, and meaning of drug using in the Philippines from the lens of morality and work ethics. Journal of Occupational Science, 2020; 27(1):12-21.

- 26) Sy M, et al. Doing interprofessional research in the COVID-19 era: a discussion paper. Journal of Interprofessional Care, 2020; 34(5):600-606.
- 27) Sy M, et al. Shared voices of Filipino occupational therapists during the COVID-19 pandemic: reflections from an online forum. World Federation of Occupational Therapists Bulletin, 2020; 76(1): 60-64.
- 28) Ozone S, et al. Students' understanding of social determinants of health in a community-based curriculum: a general inductive approach for qualitative data analysis. BMC Medical Education, 2020; 20(1):1-8.
- 29) Abe H, et al. Development of the Undergraduate Version of the Interprofessional Learning Scale (UIPLS). Journal of Allied Health, 2019; 48:3-10.
- 30) Hamada S, et al. Effectiveness of an interprofessional education program using team-based learning for medical students: A randomized controlled trial. Journal of General and Family Medicine, 2019; 21(1):2-9.
- 31) Haruta J, et al. Validity Evidence for Interprofessional Performance Scale in Conference (IPSC) in Japan. MedEdPublish, 2019; 8(1):54.
- 32) Lee B, et al. Key factors affecting the integration of interprofessional education into human resources for health reform: a Lao People's Democratic Republic case study. Journal of Interprofessional Care, 2019; 33(4):356–360.
- 33) Maeno T, et al. Interprofessional education in medical schools in Japan. PLoS One, 2019; 14(1): e0210912.
- 34) Sy M, et al. The birth of a national network for interprofessional education and collaboration: results from an inter-university partnership. Philippine Journal of Allied health Sciences, 2019; 3(1):1-5.
- 35) Sy M, et al., Uncovering the lived experiences of Filipino drug recoverees towards occupational participation and justice through an interpretative phenomenological analysis. Scandinavian Journal of Occupational Therapy, 2019; 1:14.
- 36) Watanabe H, et al. Changes in attitudes of undergraduate students learning interprofessional education in the absence of patient safety modules: evaluation with a modified T-TAQ instrument. Journal of Interprofessional Care, 2019; 33(6):689–696.
- 37) Haruta J, et al. Translation and cultural adaptation of the Japanese version of the interprofessional facilitation scale. JIC, 2018; 32:321-328.
- 38) Imafuku R, et al. What did first-year students experience during their interprofessional education? A qualitative analysis of e-portfolios. Journal of Interprofessional Care, 2018; 32(2):358-366.
- 39) Makino T, et al. Health science students' attitudes towards healthcare teams: A comparison between two universities. Journal of Interprofessional Care, 2018; 32:196-202.
- 40) Tomotaki A, et al. The development and validation of the Evidence Based Practice Questionnaire: Japanese version. International Journal of Nursing Practice. 2018; 24(2): e12617.
- 41) Haruta J, et al. How do healthcare professionals and lay people learn interactively? A case of transprofessional education. Asia Pacific Sch. 2017; 2:1-7.
- 42) Makino T, et al. Health science students' attitudes toward health care teams: A comparison between two universities. Journal of Interprofessional Care, 2017 in submission (revision).
- 43) Nagao N, et al. Different views on treatment decisions by first-year interprofessional healthcare students. Journal of Interprofessional Care 2017; 31:407-409.
- 44) Oishi A, et al. Cross-cultural adaptation of the professional version of the Readiness for Interprofessional Learning Scale (RIPLS) in Japanese. Journal of Interprofessional Care 2017;

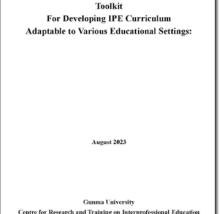
- 31:85-90.
- 45) Sakai I, et al. Development of a new measurement scale for interprofessional collaborative competency: The Chiba Interprofessional Competency Scale (CICS29). Journal of Interprofessional Care 2017; 31:59-65.
- 46) Sy M, Interprofessional education student network spreading all over the world. In Ohshima N (Ed.), Interprofessional learning series / Collaborative education and practice of health, medical, and welfare professionals. Kyodo Isho, Tokyo, pp. 203-213, 2017.
- 47) Haruta J, et al. Development of an interprofessional competency framework in Japan. Journal of Interprofessional Care 2016; 30:675-7.
- 48) Kururi N, et al. Professional identity acquisition process model in interprofessional education using structural equation modelling: 10-year initiative survey. Journal of Interprofessional Care, 2016; 30:175-183.
- 49) Lee B, et al. A plan for embedding an interprofessional education initiative into an existing programme in a Southeast Asian university. Journal of Interprofessional Care 2016; 30: 401-403.
- 50) Makino T, et al. Attitudes of nursing school deans toward interprofessional education in Western Pacific Region countries. Journal of Interprofessional Care, 2015. DOI:10.3109/135 61820.2015.1027337.
- 51) Takahashi E, et al. Foundation of the Japan Association for Interprofessional Education (JAIPE), its role and future prospects, together with Collaborative Practice of Health and Social Care in Japan. In: Forman D, Jones M, and Thistlethwaite J. (Eds) Leadership and collaboration: Further developments for IPE and collaborative practice. 2015, Palgrave MacMillan, Hampshire (UK).
- 52) Tominaga T, et al. Psychological impact of lifestyle-related disease disclosure at general checkup: a prospective. BMC Family Practice, 2015; 16:60.
- 53) Kururi N, et al. Repeated cross-sectional study of the longitudinal changes in attitudes toward interprofessional health care teams amongst undergraduate students. Journal of Interprofessional Care, 2014; 28(4):285-91.
- 54) Yamamoto T, et al. Development of a new measurement scale for interprofessional collaborative competency: a pilot study in Japan. Journal of Interprofessional Care, 2014; 28(1):45-51.
- 55) Maeno T, et al. Japanese Students' perception of their learning from an interprofessional education program: a qualitative study. International Journal of Medical Education, 2013; 4:9-17.
- 56) Makino T, et al. Attitudes toward interprofessional healthcare teams: a comparison between undergraduate students and alumni. Journal of Interprofessional Care, 2013; 27(3):261-8.

#### **Toolkit**

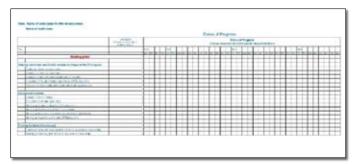
Backgrounds of educational institutions worldwide which aim to implement IPE vary widely from school to school. The "Toolkit For Developing IPE Curriculum Adaptable to Various Educational Settings" was developed by the Centre for the purpose of supporting the development of IPE curriculum that can be adapted to various educational environments. Framework of the toolkit consists of six domains: Current situation of the educational settings and background, educational contents, faculty members, evaluation and examination of educational effect, networking with other IPE program organizers, and promoting factors and inhibiting factors for the development of IPE programs. A checklist is prepared in the toolkit that guides concrete steps in developing IPE programs. We distribute this toolkit to the participants of IPE training course or workshops and ask them to report the timeframe and progress.

#### ツールキット

IPEの導入を目指す教育機関の背景はとても多様です。当センターでは、さまざまな教育環境に適応したIPE カリキュラムの開発を支援することを目的として、Toolkit For Developing IPE Curriculum Adaptable to Various Educational Settingsを開発しました。ツールキットの枠組みは、教育現場の現状と背景・教育内容・教員構成・教育効果の評価と検討・他のIPEプログラム実施組織とのネットワーク構築・IPEプログラム開発の促進要因と阻害要因の6つの領域で構成されており、IPEプログラム開発の具体的な手順をガイドするチェックリストを用意しています。IPEトレーニングコースやワークショップの際に参加者に提供し、開発に向けたスケジュールと進捗状況を報告してもらうようにしています。



(WHO Collaborating Centre)



#### **Overview of IPE Training Course Participants**

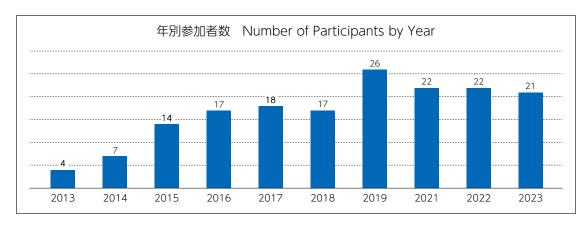
From 2013 until 2023, the Centre hosted the IPE Training Course 10 times, with the exception of 2020, when the program was suspended due to COVID-19. Although there were 38 and 47 applicants for the 2021 and 2022 programs offered online, we limited the number to 22 so that the faces of all participants could be seen on a screen.

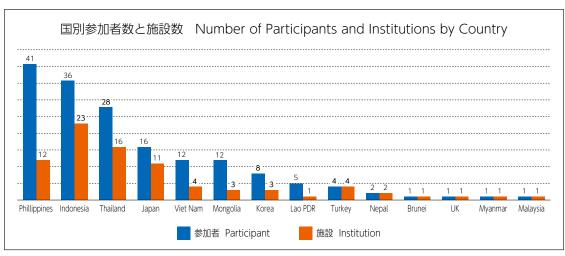
More people participated from the Philippines, Indonesia, and Thailand, and a larger number of institutions in Indonesia and Thailand sent participants to our programs. We had participants from Viet Nam, Brunei, and Malaysia recently as a result of our public relations work. Because programs for domestic participants were offered concurrently in 2015 and 2016, some Japanese are included in the total.

#### IPEトレーニングコース参加者概況

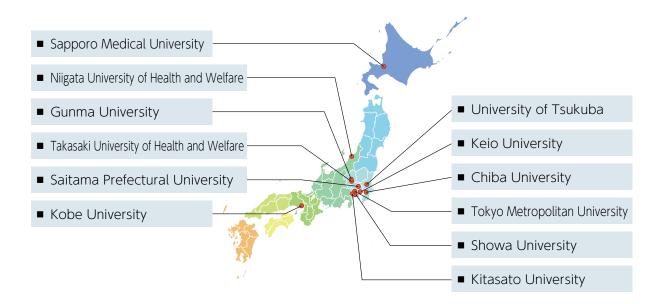
新型コロナウイルス感染症の影響で中止した2020年を除き、IPEトレーニングコースは2013年から2023年まで10回開催された。オンラインで開催した2021年と2022年については38人と47人から応募があったが、全員の顔を見ることができるよう人数を絞って実施された。

国別ではフィリピン、インドネシア、タイからの参加者が多く、インドネシアとタイは施設数も多い。広報活動により、近年はベトナムやブルネイ、マレイシアからも参加している。2015年と2016年は同時に国内向けコースを開催したため、参加者には日本人も含まれている。





## Japan Interprofessional Working and Education Network (JIPWEN)



JIPWEN is an inter-university network established in 2008 that engages in interprofessional education (IPE). Various efforts are being made in countries around the world to compensate for the shortage of health, medical and welfare human resources. However, there are still some aspects that are insufficient in terms of quality assurance and improvement. Therefore, JIPWEN is contributing to the spread and development of IPE by providing a high-quality collaborative education model.

JIPWENは2008年に設立された多職種連携教育 (IPE) に従事している大学間ネットワークです。保健医療福祉人材の不足を補うべく、世界の国々では様々な取り組みが行われています。しかし質の保証、向上に関してはまだ不十分な面があります。そこで、JIPWENは良質の連携教育モデルの提供することで、IPEの普及・発展に貢献しています。

#### **JIPWEN Activities**

- Quality assurance and evaluation of health, medical and welfare human resources education
- 2. Working together with International institutions
- 3. Cooperation with other organizations and networks
- 4. Verification of high-quality collaborative education models through academic research activities

#### JIPWENの活動

- 1. 保健医療福祉人材教育の品質保証と評価
- 2. 国際機関や各国政府との連携
- 3. 他の組織やネットワークとの協力
- 4. 学術研究活動を通じた良質の連携教育モデルの検証

# Sapporo Medical University Medical Staff Development Center Educational Development and Research Division 札幌医科大学 医療人育成センター教育開発研究部門



With the founding of the Medical Staff Development Center in 2008, the Educational Development and Research Division was established. It is responsible for developing, implementing, and evaluating medical education and FD programs. Since its inception, the division has provided education in community medicine beginning in the first year of medical school, as well as developing cross-faculty and cross-professional educational programs.

教育開発研究部門は2008年、医療人育成センター設置とともに開設され、医学教育・FDプログラムの開発・実施・評価を行っています。また設置初期より初年次からの地域医療教育を実施するとともに、学部横断的・職種横断的な教育プログラムを展開しています。

#### University of Tsukuba 筑波大学





The University of Tsukuba's School of Medicine and Health Sciences introduced interprofessional education in 2006. Through inter-university cooperation, we expanded the range of professions and enhanced educational programs, allowing students to learn step by step from the early years of study. We have disseminated research findings on educational effects and promoted interprofessional education.

筑波大学医学群では2006年より多職種連携教育を導入しました。大学間連携により職種を広げ、低学年から段階的に学べるように教育プログラムを充実させてきました。その教育効果について研究成果を発信し、多職種連携教育の推進に取り組んでいます。

#### Saitama Prefectural University 埼玉県立大学



埼玉県立大学保健医療福祉科学学会第13回学術集会鼎談「あらためて連携について考える」 左:朝日雅也(埼玉県立大学)、中:國澤尚子(埼玉県立大学)、右:大塚眞理子(長野県看護大学学長)

Saitama Prefectural University offers IPE courses in both of undergraduate and the master's and doctoral programs of graduate schools, and also conducts training for professionals. In the conference discussion held in 2022, we summarized the development of IPE/IPW. In 2024, we will open an IPE Center (tentative name) to centralize and strengthen interprofessional education.

埼玉県立大学は学部および大学院博士前期・後期課程にIPE科目を配置し、専門職対象の研修も実施しています。2022年に開催した学会の鼎談ではIPE/IPWの発展について総括しました。2024年にはIPEセンター(仮称)を開設し、専門職連携教育を一元化して強化を図ります。

### Chiba University Inter Professional Education Research Center 千葉大学 専門職連携教育研究センター



Chiba University introduced the "Inohana IPE Program" to undergraduate education in 2007 as a required course for the Faculties of Medicine, Nursing, and Pharmaceutical Sciences. Currently, the Faculty of Engineering also participates in part of the program. The Inter Professional Education Research Center manages the undergraduate and graduate IPE programs, IPE/IPW training for professionals, IPE/IPW research and dissemination, and promotion of global IPE exchange programs.

千葉大学では2007年から医学部・看護学部・薬学部の必修科目として「亥鼻IPEプログラム」を学部教育に導入しました。現在では一部に工学部も参加しています。専門職連携教育研究センターは学部・大学院のIPEプログラムの運営、専門職向けのIPE/IPW研修、IPE・IPWの研究・普及、グローバルIPEの交流を推進しています。

#### Kitasato University 北里大学



Kitasato University has four medical faculties, two vocational schools, and three affiliated hospitals, and it trains 15 types of medical professionals. Taking advantage of this feature, Kitasato University has offered a cross-faculty education program on team medicine since 2006 to develop the ability to understand other professions and to cooperate and collaborate among professions.

北里大学は、医療系4学部と2専門学校、 附属の3病院を有し15の医療職を育成している。この特徴を活かし、2006年より、他職種を理解し、職種間で連携、協働できる能力を身につける学部横断型のチーム医療教育プログラムを開講しています。

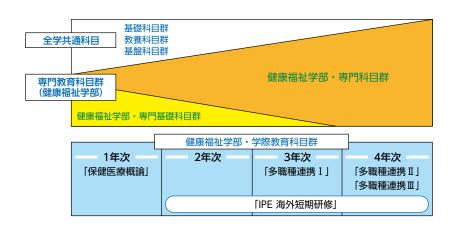
#### Keio University 慶應義塾大学



Keio University offers a joint educational program across the three faculties of medicine, nursing, and pharmacy to deepen students' understanding of team medicine from their early academic years. In addition, some students from the three faculties visit Laos to study primary health care together.

慶應義塾大学では、医学部・看護医療学部・薬学部からなる医療系三学部合同教育を実施し、低学年のうちからチーム医療について理解を深めています。また3学部の学生でラオスに赴き、プライマリ・ヘルスケアについて共に学ぶプログラムを展開しています。

#### Tokyo Metropolitan University 東京都立大学



In 2020, the Faculty of Health and Welfare of Tokyo Metropolitan University established a new interdisciplinary subject group as part of a new specialized education system to systematically summarize and reflect interprofessional education practice in the curriculum.

東京都立大学健康福祉学部では、新たな専門教育体系として、それまでの多職種連携教育の実践を体系的にまとめ、教育課程により具体的に反映させる目的で、学際教育科目群として、2020年度より新たに創設しました。

#### Showa University 昭和大学



Showa University is a medical university consisting of faculties of medicine, dentistry, pharmacy, and healthcare (nursing, physical therapy, and occupational therapy). The university promotes IPW/IPE, and all students in all years of study receive systematic and step-by-step interprofessional education (early experiental learning, PBL, simulation training, hospital ward training, home care practice, and so on).

昭和大学は医・歯・薬・保健医療学部 (看護・理学療法・作業療法)からなる医 系総合大学です。IPW・IPEを推進し、全 学年で全学生が体系的・段階的な多職種 連携教育(早期体験実習、PBL、シミュレ ーション実習、病棟実習、在宅医療実習な ど)を学修しています。

### Niigata University of Health and Welfare 新潟医療福祉大学



Under the guidance of former President Hideaki Takahashi, the university, which established in 2001, finalized IPE programs for first through fourth-year students in 2008. Notably, the IPE program for fourth-year students had participants from five overseas universities. The program focused on third-year students in March 2023, and it proved to be comparably effective.

2001年開学の本学では、高橋榮明元学長のご指導の下、2008年度には1~4年生を通したIPEプログラムが完成した。特に4年生中心の演習には海外5大学も参加してきた。また2023年3月には3年生を主体とし、まったく遜色ない効果を証明できた。

### Takasaki University of Health and Welfare 高崎健康福祉大学



Takasaki University of Health and Welfare is a university providing comprehensive education and research in the field of health and welfare in five faculties and eight departments. To promote well-being, the university introduced interprofessional education to undergraduate programs as a regular course in 2021. The university organizes a global campaign for patient safety with some students every year.

高崎健康福祉大学は、5学部8学科で健康と福祉に関する学問を総合的に教育研究する大学です。Well-beingを追求し、2021年より多職種連携教育を正規科目として学部教育に導入しました。学生参加で毎年世界患者安全キャンペーンを実施しています。

### Japan International Cooperation Agency (JICA)との協働

WHO CC at Gunma University have worked together with JICA as the Partnership Project for Global Health and Universal Health Coverage (GLO+UHC) Phase 2 by Thailand and Japan since 2007.

群馬大学WHO協力センターは、タイと日本による「グローバルヘルスとユニバーサルヘルスカバレッジのためのパートナーシッププロジェクト(GLO+UHC)フェーズ2」として、2007年よりJICAと共に活動しています。

#### Goals

- 1. To prepare the assessment instrument in several language of priority countries.
- 2. To assess interprofessional collaborative practice in some priority countries and publish the paper based on the data from assessment instruments.

#### **Activities**

- Translation of assessment instruments from English into each country's language
- 2. Research for reliability and validity of translated assessments instruments

#### 目標

- 1. 評価尺度をpriority countriesの複数の言語で作成する。
- 2. いくつかのpriority countries において、 専門職間の協働実践を評価し、評価尺度か ら得られたデータに基づいて論文を発表す る。

#### 活動内容

- 1. 評価尺度の英語から各国言語への翻訳
- 2. 翻訳された評価尺度の信頼性と妥当性の調査

#### Participating universities for researches in each country

- 1) Boromarajonani college of nursing Udonthani, Thailand
- 2) Universitas Islam Sultan Agung, Indonesia
- 3) Mongolian National University of Medical Sciences, Mongolia
- 4) Gunma University, Japan



## Asia-Pacific Interprofessional Education Research Alliance (AIR-Alliance)



Country	Number of members		
	(36)		
① Bangladesh	1		
② Brunei	1		
③ Indonesia	10		
4 Mongolia	5		
⑤ Korea, Rep.	2		
6 Thailand	7		
7 The Philippines	8		
8 Viet Nam	2		

(As of February 2024)

The Asia-Pacific Interprofessional Education Research Alliance (AIR Alliance) is a regional alliance for promoting IPE research. The AIR Alliance is composed of institutions/associations/groups/networks engaged in IPE research, especially in the areas of health and social care.

アジア太平洋地域多職種連携教育研究アライアンス (AIR Alliance) は、IPE 研究を促進するための地域 アライアンスです。保健および介護分野における IPE 研究に従事する機関/協会/グループ/ネットワークで構成されています。

#### **AIR Alliance Activities**

- The AIR Alliance provides a framework to exchange information and experiences for assessing and improving IPE programs.
- 2. The AIR Alliance provides a framework to exchange information and experiences for establishing educational/research hubs in IPE.
- 3. The AIR Alliance provides a platform for facilitating the exchange of human resources among member institutions.

#### AIR Allianceの活動

- 1. IPEプログラムの評価と改善のための枠組みを提供します。
- 2. IPE教育・研究拠点を作るための枠組みを 提供します。
- 人材交流を促進するための枠組みを提供します。

#### **Gunma University (WHO Collaborating Centre)**

- WHO Collaborating Centre for Research and Training on Interprofessional Education
- Graduate school of Medicine, Gunma University
- Graduate school of Health Sciences, Gunma University
- Gunma University Hospital

#### 群馬大学(WHO協力センター)

- 群馬大学多職種連携教育研究研修センター
- 群馬大学大学院医学系研究科
- 群馬大学大学院保健学研究科
- 群馬大学医学部附属病院

