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**Mongolian National University of Medical Sciences faculty attitudes towards inter-professional education, teamwork and their barriers**

**Azjargal Baatar, Oyuntsetseg Sandag and Sumberzul Nyamjav**  
Mongolian National University of Medical Sciences, Mongolia

**Background:** Faculty development is, therefore important to ensure that teachers and trainees are well prepared to assume their responsibilities as educators. The current and proposed effort to train more doctors, nurses, midwives and other health professionals puts an extra burden on institutions and their staff. More educators are in need and their functions must be made more attractive. Incentives such as access to faculty development are part of the response to bridge the gap between teaching and clinical work by allowing interaction between monitoring and coaching, relationships and networks, organizations systems and cultures and tasks and activities.

**Objective:** This study sought to understand the attitudes held by faculty at one academic Mongolian National University of Medical Sciences (MNUMS) concerning Inter-Professional Education (IPE) and teamwork. This MNUMS will to experience very modest progress towards IPE implementation. The study is based upon previous work by Curran et al. (2007) that asked faculty to rate their attitudes towards inter-professional health care teams, IPE and inter-professional learning in an academic setting.

**Methods:** A descriptive, cross-sectional design was used to survey participants from a convenience sample of faculty at one academic MNUMS located within a large university in the Mongolia. The colleges represented were medicine, dentistry, nursing, pharmacy, public health, biomedicine and traditional medicine.

**Results:** The attitude score was determined by summing the responses to 14 statements. The mean score ( $\pm$ SD) for all respondents was 4.1 ( $\pm$ 0.10). Highly scored benefits included more efficient care, better understanding of the work of other health professionals and fostering communication. The attitude score was determined by summing the responses to 15 statements. The mean score ( $\pm$ SD) for all respondents was 3.83 ( $\pm$ 0.10). Highly scored benefits of IPE were "Patient would ultimately benefit if health care students worked together to solve patient problems" and "Learning between health care students before qualification would improve working relationships after qualifications". The attitude score was determined by summing the responses to 13 statements. The mean score ( $\pm$ SD) for all respondents was 3.41 ( $\pm$ 0.10). The most highly scored benefits of IPE in the academic setting "Inter-professional efforts require support from campus administration" and "Inter-professional efforts weaken course content". The mean score ( $\pm$ SD) for all respondents was 1.26 ( $\pm$ 0.64). These barriers included lack of reward for faculty, problems with schedule/calendar, classroom size, lack of administration support, lack of received value, turf battles, student acceptance, lack of financial resources, faculty attitudes and rigid curricula.

**Conclusion:** Therefore, we need to recognize that the knowledge level in general professional competency is not a critical barrier to implementing IPE.

azjargal.b@mnums.edu.mn