













## “Field Visits”

### Person-centred, interprofessional learning

	<b>Content</b>	Reflection and knowledge exchange of professionals, lecturers and managers on person-centred, interprofessional rehabilitation in various European countries. All stakeholders present their working environment, methods and expertise around person-centred care, the use of ICF and interprofessional learning, e.g. <a href="#">student-run ward</a> .
	<b>Learning objectives</b>	Deepened knowledge and understanding of each other’s work field; health care system (e.g., insurance), organisational structures and patient groups, interprofessional learning or collaboration process.
	<b>Person-centredness</b>	Yes, via physical tour in the rehabilitation centre and presentation/discussion of cases.
	<b>ICF (<a href="#">WHO framework</a>)</b>	Yes, by showing how to use ICF in the Electronic Patient Files and discussions on the use of ICF with patient cases.
	<b>Clinical reasoning</b>	Yes, by applying case discussions.
	<b>Learning principles</b> (see <a href="#">guide</a> for educators)	Practise-based learning (in realistic working field) Activity-based learning (case-based learning) Observation-based learning (observation of interprofessional activities in the working field) Exchange-based learning (debates and case-discussion)
	<b>Setting</b>	In and outpatient rehabilitation centres. In-person, blended or online settings are feasible and were tested.
	<b>Target groups</b>	Professionals, lecturers and managers
	<b>Number of participants</b>	Not specified but there is more interaction when the group is small.
	<b>Involved professions</b>	All professions involved in rehabilitation medicine (medical, nursing, paramedical and psycho-social disciplines).
	<b>Duration, frequency</b>	2 days per field visit. As often as working field partners are involved.
	<b>Materials</b>	Discussions can be supported by videos of patients and/or interviews in real time with patients, and collaborative online tools.
	<b>Evaluation</b>	Collection and summary of learnings from the visit: Qualitative group evaluation with mentimeter or “post-its” (Mural).
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### Findings from the evaluation

	<b>Reaction</b>	<a href="#">Summary of lessons learned</a> , statements in the <a href="#">open exchange forum</a> . Interprofessional team depends on regional context and patient groups.
	<b>Learning</b>	Knowledge of the MAGPIED-model, patient participation, ICF, <a href="#">management decisions</a> , pre-rehabilitation, <a href="#">student-run interprofessional learning ward</a> .
	<b>Behaviour</b>	Depends on time and context, combines holistic view and logic thinking.
	<b>Results</b>	Development and implementation of <a href="#">interprofessional internship model</a> .

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