

INPRO

STUDENT-RUN INTERPROFESSIONAL LEARNING WARD

GUIDELINE

ALIGNING INTERPROFESSIONAL EDUCATION AND COLLABORATION IN PRACTICE

using promising regional experiences for international exchange

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PREFACE

INPRO is an international project, co-funded by the European Union, in which higher education institutions (HEI's) and rehabilitation centers work in partnership on aligning interprofessional collaboration. Or to state it more concrete: to further enable a smooth transfer from training in health and social professions to the actual work setting.

This guideline shares the principles of a Student-Run Interprofessional Learning Ward (SR-IPLW).

In 2019, a SR-IPLW was started in the rehabilitation centre “Revalidatie Friesland” (RF) in The Netherlands. This was a collaboration between RF and Hanze University of Applied Sciences (HUAS). The starting point of the SR-IPLW was that students are 'in the lead' and to create an innovative climate in which we continuously work on improvements for patients, students, lecturers and health care professionals through interprofessional collaboration. We work on the basis of practice-based evidence. This document describes the current situation at the SR-IPLW. In the future, we hope to further optimize the SR-IPLW based on the described principles.

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1. STAKEHOLDERS

The Student-Run Interprofessional Learning Ward (SR-IPLW) is a collaboration between clinical practice in rehabilitation centre “Revalidatie Friesland” (RF) and the Hanze University of Applied Sciences (HUAS). Professionals include physicians, nurses, and colleagues from para-medical (i.e., physical therapy, occupational therapy, speech- and language pathology and dietetics) and psycho-social work (i.e., social work, psychology, activity therapy and music therapy) who are involved in patient care and innovation and research at the SR-IPLW.

Students and lecturers come from various Academies of HUAS, such as school of Health Care studies, school of Nursing and school of Social Studies. Also, adjacent Academies are involved, such as the Institute of Facility Management. Finally, management and Board of directors from HUAS as well as from RF are important stakeholders of the SR-IPLW.

2. MISSION STATEMENT, VISION AND GOALSETTING

2.1. MISSION STATEMENT

Students, patients, professionals and lecturers work and learn according to state-of-the art and future-proof medical care in a community of learners (CoL). This CoL is interprofessionally orientated.

2.2 VISION

The interprofessional CoL follows the principles of ‘Life Long Learning’ (see www.government.nl/topics/lifelong-learning-and-development) in which:

- Improvement of knowledge and skills are fundamentals
- Experimenting and practicing takes place in formal and informal learning activities
- Critical reflections (i.e., questioning and feedback) attaches significance to learning experiences
- Open mindset, willingness to learn, develop and grow competence

2.3 GOALSETTING

It is important to set goals for implementing a SR-IPLW. Apart from the main goal, sub-goals are divided in contextual or organisational goals and goals with regard to content. The main goal needs to be set for the complete implementation phase (also see “Roadmap for implementation of the SR-IPLW” in which the process of implementation is described). Sub-goals will be set for each pilot phase (a period of a semester, i.e., 20 weeks). After evaluation of within every pilot, the sub-goals for the following pilot can be set-up, following a quality improvement cycle.

2.3.1 MAIN GOAL

RF realises together with HUAS a SR-IPLW where excellent patient care, high quality research and innovation and interprofessional education will be integrated designed by students, professionals and lecturers from various academies.

2.3.2 SUB GOALS

2.3.2.1 ORGANISATION

The organisation of the patient care and research/innovation projects at the SR-IPLW are adequately embedded, including:

- Facilities:
 - a shared room/space at the SR-IPLW where all patients can eat and socialise together (dining and living room)
 - an office at the SR-IPLW where all students, professionals and lecturers can work/collaborate in patient care
 - an office at the SR-IPLW where all students, professionals, lecturers and researchers can work/collaborate in research and innovation projects
 - a treatment room at the SR-IPLW for physical training (PT and OT)
 - a consulting room at the SR-IPLW for physician, SLP, dietician and psycho-social workers (such as, social work and psychologist)
- Planning: students, professionals and lecturers run their own planning for health care activities (such as treatment, ADL, etc.)
- A guideline for students to fully take over control of running the SR-IPLW
- A guideline for education for the students of the SR-IPLW

2.3.2.2 CONTENT

Aspects concerning the content of the patient care and research/innovation at the SR-IPLW are adequately embedded, including:

- Various activities for Interprofessional collaborative practice (IPCP) and – education (IPE):
 - o Interprofessional mentoring
 - o Interprofessional group reflection
 - o Interprofessional group instructions for students
 - o Interprofessional team communication (meetings)
- Various activities for control-taking of patients:
 - o Goalsetting (per week, per 6 weeks)
- Various working groups regarding:
 - o Therapeutic conditions
 - o Family care
 - o Interprofessional collaboration
- Interprofessional CoL for research and innovation with interprofessional research tracks

3 STRUCTURE AND REQUIREMENTS

3.1 AGREEMENT BETWEEN RF AND HUAS

Both organisations from health care and higher education signed a voluntary strategic agreement in which they confirm the collaboration with regard to the SR-IPLW. This agreement focusses on the description of both organisations, specifications on program and organisation of the collaboration, intellectual property, pledge of secrecy with regard to privacy, liability, commencement and the end of the agreement.

3.2 INTERNAL AGREEMENT

In both organisations there needs to be commitment at various levels. First, at the management level the SR-IPLW needs to be included in the budget and business plan in order to provide resources for professionals and lecturers.

Second, at the practice level, there needs to be support from professionals and lecturers to actively participate in an innovative project. Also, basic support is needed from facilitative departments in both organisations (such as facility services; cleaning, kitchen and restaurant services, et cetera). Lastly, support is needed from various advisory boards, such as medical staff and employee council.

3.3 ORGANISATION CHARD SR-IPLW

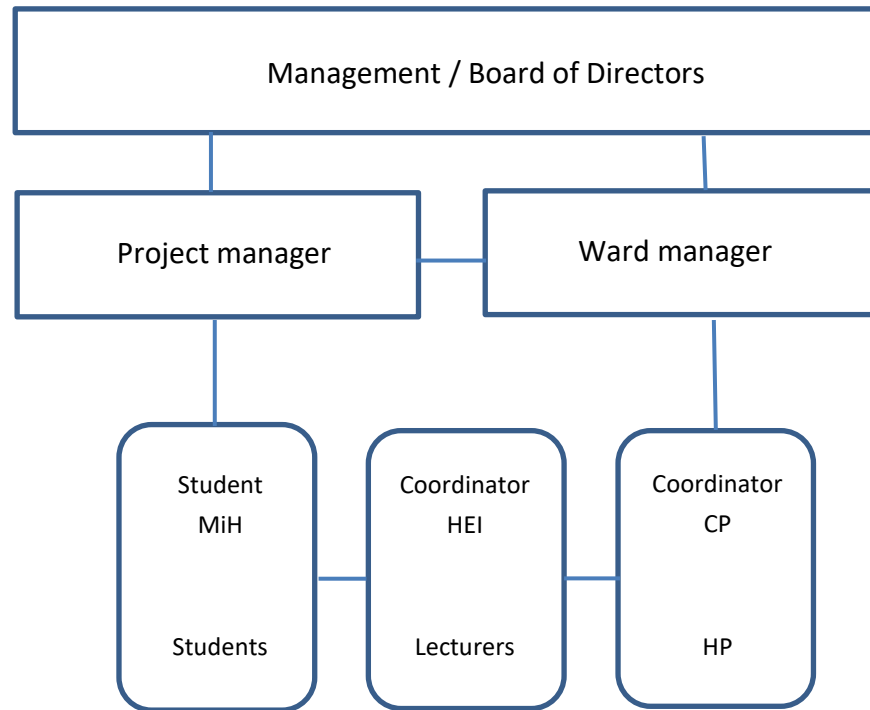


Figure 1

MiH=Management in Healthcare, HEI=Higher Education Institute, CP=clinical practice, HP=Health care professionals

3.4 CONSTRUCTION

Various stakeholders (i.e., students, patients, lecturers, professionals and researchers) are involved at the SR-IPLW. Therefore, different roles are represented in the table below. The various roles are described in detail later in this document.

Table 1: overview of stakeholders SR-IPLW

Who	Discipline	Role
1 Ward manager	Management in Healthcare	Holder clinical practice
1 Project manager		Holder project
2 Project coordinators		Contact person clinical practice, Contact person HEI
14 patients		
29 professionals	Rehabilitation medicine (2), planning, nursing (7), occupational therapy (5), speech-language pathology (3), social work, psychology, physical therapy (5), music therapy, activity therapy, dietetics, psycho-motor therapy	Healthcare professional, coach
13 project members	Rehabilitation medicine, planning, nursing (2), occupational therapy (2), physiotherapy (2), speech language pathology (2), social work, psychology, psycho-motor therapy	Project member
7 lecturers	Physical therapy, speech language pathology, nursing (2), dietetics, management in health care	Coach, project member
12 students	Rehabilitation physician, physical therapy, occupational therapy, speech-language pathology, nursing (4), psychology, social work, management in health care, facility management	Intern
2 researchers	Nursing, Health Care	Research and Innovation

3.5 ROLES, TASKS AND RESPONSABILITIES

Each role has its own tasks and responsibilities. These are described in table 2 below.

Table 2: overview of roles, tasks and responsibilities of the stakeholders of the SR-IPLW

Role	Tasks	Responsibilities
Ward manager	<ul style="list-style-type: none"> - Facilitate implementation of the project in the clinic - Provide requirements for state-of-the art health care 	<ul style="list-style-type: none"> - Final responsibility for a safe work and learning atmosphere - Final responsibility for the results of the SR-IPLW with regard to production, finance, safety, quality and working pleasure.
Project manager	<ul style="list-style-type: none"> - Account for responsibility towards the project principles - Supervise and manage project process and goals - Maintain contact between clinical practice and HEI at level of management and board of directors 	<ul style="list-style-type: none"> - Achieving project goals
Coordinator	<ul style="list-style-type: none"> - Maintain contact between clinical practice and HEI at level of professionals and educators 	<ul style="list-style-type: none"> - Adequate collaboration between clinical practice and HEI
Rehabilitation Physician	<ul style="list-style-type: none"> - Supervise the quality of the total rehabilitation process - Supervise the adjustment of the rehabilitation content 	<ul style="list-style-type: none"> - Final responsibility for the rehabilitation process of each patient and the quality of patient care at the SR-IPLW - Final responsibility of the adjustment of the rehabilitation content
Student Management in Health care	<ul style="list-style-type: none"> - Supervise the team process of the students at the SR-IPLW - Evaluate innovations and processes at the SR-IPLW - Supervise and communicate own development 	<ul style="list-style-type: none"> - Responsible for own learning process and development of the internship
Student	<ul style="list-style-type: none"> - Supervise and communicate own development 	<ul style="list-style-type: none"> - Responsible for own learning process and development of the internship - Responsible for making agreements on presence and absence

	<p>Under supervision of coaches and depending on the degree of independence of the intern:</p> <ul style="list-style-type: none"> - Mono- and Interprofessional consultation of the content of treatment with professionals, lecturers and other interns - Accomplish mono- and interprofessional treatments and meetings - Write treatment plans and patient records 	<p>Under supervision of healthcare professionals and depending on the degree of independence of the intern:</p> <ul style="list-style-type: none"> - Responsible for mono- and interprofessional consultation of the content of treatment with professionals, lecturers and other interns - Responsible for the quality of mono- and interprofessional patient care - Responsible for treatment plans and patient records
Professional	<ul style="list-style-type: none"> - Supervise the quality, safety and ethical aspects of patient care - Provide mono- and interprofessional treatments - Advise the students during execution of the mono- and interprofessional treatments - Supervise the progression of the student professionally and personally - Provide feedback on the treatment plans and patient records of the students <p>Depending on the degree of independence and the presence of the students:</p> <ul style="list-style-type: none"> - Accomplish mono- and interprofessional treatments and meetings - Write treatment plans and patient records 	<ul style="list-style-type: none"> - Final responsibility for quality, safety and ethical aspects of patient care - Final responsibility for treatment plans and patient records - Responsible for the supervision of the students professionally and personally
Lecturer	<ul style="list-style-type: none"> - Coach of the students - Coach of the professionals - Applicate of creative learning methods - Share and generalise knowledge - Conduct group sessions for reflection activities for students and professionals 	<ul style="list-style-type: none"> - Responsible for learning outcomes - Secure a safe learning climate
Planner	<ul style="list-style-type: none"> - Plan of therapy blocks and group appointments and -treatments 	<ul style="list-style-type: none"> - Responsible for the planning of therapy blocks and the group appointments and -treatments

3.6 PRACTICAL CIRCUMSTANCES

The rehabilitation clinic is located at 46 kilometres from the HUAS. This is approximately a 45 minute drive by car.

4 ACTIVITIES

The processes described in this chapter should facilitate the primary processes, regarding:

1. Delivery of state-of-the art patient care
2. Delivery of research and innovation activities
3. Educate and supervise interns
4. Support of professionals

Processes need to be evaluated and intermittent between pilots phases adapted.

4.1 PLANNING

4.1.1. WEEK LAUNCH

The week starts with a week launch where patients are divided in smaller groups and can discuss their goals for the coming week with other patients, professionals and students from various disciplines. Principles of motivational interviewing are used to reach agreement of the treatment goals. These goals are drawn at a white board and, with permission of the patient, shown at their own room. Also, the individual formulated goals will be reported in the electronic patient record.

4.1.2 DAILY REPORT

Monday, Wednesday and Thursday there is a short (15-30 minute) report for internal co-ordination under supervision of the rehabilitation physician. All patients will be shortly discussed for daily comments (such as, an upcoming hospital visit).

4.1.3 CONTACT WITH THE PLANNING

Every week there is a meeting between the planner of the SR-IPLW and a professional to discuss planning issues.

4.2 THERAPY

A person centred approach is used based on shared responsibility, collaboration and holistic view of the human being, acting in a social context according to his or her preferences or goals (Mills, 2017). The ICF framework fits this approach and is, therefore, used at the SR-IPLW. For goalsetting and reporting of treatment findings, ICF categories and domains are built in the electronic patient record. Accordingly, the SMART method is used for setting the goals of a treatment period.

4.2.1 THERAPY BLOCKS

There are two therapy blocks: one in the morning and one in the afternoon. There are no time frames for these blocks. This depends on the individual therapy goals per patient and the working schedule of each professional.

Group therapy and sixty percent of the individual therapies per discipline will be planned by the planner. All other (individual or combination) therapy sessions will be organised by the professionals, students and the patients themselves. This requires adequate interprofessional communication with each other.

4.2.2 THERAPY LOCATION

The aim is to realise as much therapy sessions as possible located at the SR-IPLW. This supports interprofessional collaboration, training in functional activities and maximises the therapeutic climate. Therefore, therapy takes place as close as possible to the patient's living space (his own room, the living room where socialization takes place, etc.). Various treatment rooms are located at the SR-IPLW.

4.3 CONSULTATION

Interprofessional collaboration demands intensive consultation between various stakeholders. This chapters describe consultation with regard to the content of patient care and organisation of the SR-IPLW.

4.3.1 CONSULTATION WITH REGARD TO PATIENT CARE

Formal consultation about patients takes places in the team communication, week launch and daily report (see 4.1.1 and 4.1.2). However, since all students, professionals together with lecturers work in one office, various moments of informal consultation will occur there.

4.3.2 ORGANISATIONAL CONSULTATION

There are three forms of organisational consultation at the SR-IPLW:

1. Management Consultation

- Frequency: weekly 30 minutes
- Aim: monitoring actual issues
- Participants: project manager, Ward manager, Student MiH, Rehabilitation physician

2. Organizational Consultation

- Frequency: ones in two weeks, 1 hour
- Aim: Discussion of organisational issues and monitoring of the process (i.e, organisational, collaboration and educational issues).
- Participants: delegation of professionals (all disciplines), student MiH, planner, project manager (chairman) and Ward manager

3. Improvement sessions

- Frequency: weekly, 15 minutes
- Aim: improvement of short-cycle processes
- Participants: students and professionals of the SR-IPLW

4.4 COMMUNICATION

4.4.1 INTERNAL COMMUNICATION

All organisational meetings as described in 4.3.2 will be registered by minutes. These minutes will be stored at a central file in the network of the clinical organization. Only active participants of the SR-IPLW have access to this file.

Communication about patient care takes place in the electronic patient record ('team communication').

4.4.2 EXTERNAL COMMUNICATION

Dissemination outside the SR-IPLW takes place at traditional communication channels of the organisation, such as website, newsletters and social media.

4.5 INNOVATIVE STRUCTURE

At the SR-IPLW innovations can be generated and implemented. In addition, it is possible that bottlenecks are encountered that disrupt the primary processes in the SR-IPLW. This may concern both substantive and organizational bottlenecks. By applying 'improvement-sessions' we aim to structure problems, possible solutions, actions and action-holders.

4.6 APPLICATION PROCEDURE NEW STUDENTS

All students must apply for the SR-IPLW. For each discipline, a vacancy is posted specifically for the SR-IPLW. A motivation letter and job interview are part of the procedure. The job interview is conducted with the MiH student, a professional of the same discipline and a professional from another discipline.

4.7 INTRODUCTION OF THE NEW STUDENTS

An introduction program has been drawn up for the new students. During one week, interns get to know each other, the organization and the various disciplines (social acquaintance; phase 1 of the META model; Reinders, 2018; Reinders et al., 2020b). This program is shown in the Appendix.

5 WORKAPPOINTMENTS FOR STUDENTS

5.1 WORKING HOURS

The students coordinate their working days with their supervisors. The starting point is to have as much agreement as possible in this respect. The coaches have the task of coordinating this properly. In addition, the working hours are the same for all interns.

The working hours are from 8.30 am to 5 pm. There is an exception for nurse students, who are included in the nursing work schedule. Working hours can be adjusted in consultation with supervisors. During a whole working day, the students are entitled to a half-hour lunch break and two 15-minute coffee breaks.

5.2 DAYS OFF AND VACATION

Because all schools have different regulations about days off and vacations during the internship period, all students must coordinate this individually with their supervisors. It is up to the student to take into account the number of required internship hours and his/her progress.

6 LEARNING ACTIVITIES

Various learning activities take place for students as well as for professionals. These will be described separately.

6.1 STUDENTS

6.1.1 BASIC EDUCATION

The basic education starts with 5 general topics including knowledge and skills for the current context (rehabilitation) for each new student-team at the SR-IPLW. After this basic education an integral study journey starts by discussing cases. The 5 topics include:

1. Rehabilitation (stroke, recovery, pharmacological treatment and team communication)
2. Transfers
3. Cognitive rehabilitation
4. Swallowing and communication
5. ICF (goalsetting and use in treatment sessions)

6.1.2 ICF BASIC COURSE AND ADVANCED MATERIALS

During the first weeks of their internship all students follow the ICF basic course which includes the ICF e-learning from WHO instructed by a colleague. After the basic course the student can explore the advanced materials. The materials contain theory and examples and the use of ICF in different rehabilitation practical settings.

6.1.3 INTERPROFESSIONAL EDUCATION

During their internship at the SR-IPLW students from different disciplines work and learn together on a daily basis. Students need to develop interprofessional competences and, therefore, shift their focus of action to more shared domains. The group of students, professionals and lecturers give (based on the theory of social constructivism) meaning to interprofessional learning. The professionals and the lecturers are interprofessional role models on which students can reflect. Several learning activities are being used at the SR-IPLW to foster interprofessional competences (inspired by self-chosen competences from the INPRO-CF): interprofessional coaching on the job, supervision, reflection and clinical subject classes. In addition, there are training activities and there is an exchange of knowledge and experience during informal moments at the SR-IPLW.

6.1.4 COACHING ON THE JOB

Students, professionals and lecturers collaborate in patient centred care. Student-centred supervision is applied by both professionals and lecturers in a coaching style. In addition, by applying the 'Scaffolding principles'¹ professionals and lecturers aim at 'just-in-time' support which is tailored to the need of the individual student and the interprofessional group of students. Students also collaborate in a group assignment, in which they develop a interprofessional care plan for at least one of the patients.

6.1.5 SUPERVISION

Supervision takes place for one hour every week by 2 supervisors; one from the student's own discipline and one from another discipline. Here, professional knowledge and experience are exchanged. The supervisor exchanges knowledge and experiences with the student and the student's learning process and provides the student with the necessary feedback to learn in action. Together with the student, the supervisor explores for possibilities to realise the student's plan to interprofessional collaborate with other students and professionals.

6.1.6 GROUP INTERVISION

The group of students have monthly sessions to give them headroom to reflect on their team performance. Reflection is seen as a supportive skill to collaboration. Reflection helps to understand various complex problems being dealt with on the SR-IPLW. The feedback loop of feed-up, feedback, feed-forward is applied. These sessions are supervised by a lecturer from HEI and a HR-employee of the clinical practice. Also, the INPRO-CF can be used during these reflection sessions.

6.1.7 CLASSES

There is basic education on fixed subjects (see 6.1.1 basic education) that is necessary to know and to be able to offer the best interprofessional care. However, there are also clinical classes on demand-driven topics. This gives an opportunity to learn about actual topics that take place at the SR-IPLW. Therefore, this offer is tailored to the demand, knowledge and skills of the students present and is closely intertwined with the patient-centred approach.

¹ Scaffolding challenges students to think aloud and, thereby, creating their own solutions.

6.2 PROFESSIONALS

Various meetings with professionals are organized. A further explanation can be found in the paragraphs below.

6.2.1 INTERPROFESSIONAL MEETINGS FOR PROFESSIONALS

During interprofessional meetings for professionals, experiences are shared and deepening and broadening takes place at group level. Topics that are mainly discussed here are supervising students (both mono- and interprofessional), interprofessional collaboration and being a coach/trainer for patients. In all of the cases mentioned, the professionals present from different disciplines discuss experiences and case histories. This takes place under the supervision of a moderator. This facilitates both in terms of time and facilities and in terms of content and line in the conversation. Informal exchange of information on the above subjects takes place outside these scheduled meetings. These planned meetings have a positive influence on the informal exchange of information 'in between'.

6.2.2 INTERPROFESSIONAL COMPETENCE FRAMEWORK (INPRO CF)

In addition, meetings are held at interprofessional team level where the team discusses the growth potential of professionals, both personally and at team level.

The interprofessional competence framework (INPRO-CF) serves as a guideline in this regard. Based on INPRO-CF, the individual professional or the interprofessional team chooses a topic on which growth could be achieved. The INPRO-CF helps to articulate the initial level and desired next step. Based on INPRO-CF, the desired goal, actions and points for improvement are set out that can be worked on both individually and at team level.

7 EVALUATION

Halfway through and at the end of each semester an evaluation of the working method and process takes place. Students, professionals and lecturers are represented in this evaluation. The working method is adjusted on the basis of the evaluation. During the evaluation, the results of the short-cycle improvement processes are also evaluated. The evaluation moments for the following semester are then planned. In this way, the plan-do-check-act (PDCA) cycle is used to remain an innovative ward and the working method is guaranteed.

The Extended Professional Identity Scale (EPIS; Reinders et al., 2020) is used to repeatedly measure each student's interprofessional belonging, interprofessional commitment and interprofessional belief. Finally, we will use EPIS-data of all the participating stakeholders of the SR-IPLW at the start and at the end of the semester. Ultimately, the data-analyses will inform us on the effectiveness of interventions at the SR-IPLW.

APPENDIX

Monday	Tuesday	Wednesday	Thursday	Friday
<p>Morning</p> <p>Welcome and guide tour</p> <p>Knowledge session</p> <p>Joint lunch</p>	<p>Morning</p> <p>E-learning and computer-training</p>	<p>Morning</p> <p>Workshops small disciplines, including music therapy, activity therapy and motor agogic</p>	<p>Morning</p> <p>Exchange of first experiences with each other, set up intern plan and meeting on learning outcomes based on INPRO CF</p>	<p>Morning</p> <p>Meeting on shared goalsetting</p>
<p>Afternoon</p> <p>Activity of students, professionals and lecturers about working method of the SR-IPLW and exploration of learning styles</p>	<p>Afternoon</p> <p>Observations and accompany with own discipline at the SR-IPLW</p>	<p>Afternoon</p> <p>Observations and accompany with other disciplines at the SR-IPLW</p>	<p>Afternoon</p> <p>Observations and accompany with other disciplines at the SR-IPLW</p>	<p>Afternoon</p> <p>Teambuilding activity and closing session with students, professionals and lecturers</p>