

The Journal of Inteprofessional Education and Practice:  
The Future of Healthcare Today

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## The Journal of Interprofessional Education and Practice

If one was to look for references for the phrase “interprofessional healthcare” in Google Scholar, they would find 44,000 entries and in PubMed 16,000. If one was to look at the actual articles three particular themes quickly emerge. First, all the articles suggest that the current system of silo healthcare is inefficient and costly. Two, each propose, sometimes empirically and sometimes clinically, the idea that interface multiple health care professions and practices is clearly the solution to our current healthcare crisis. Third, the variety of journals in which this information is contained is staggering and often the case is presented in a silo-based, unidimensional healthcare profession. Hence, the message is clear, cohesive and impactful. The delivery seems, in contrast, without focus following the same paths of our historical antecedents.

With the unusual fast expansion of healthcare, especially in developing countries, and the even faster growth of its impact on the healthcare budget it is beyond clear that a solution has to emerge sooner than later. Though individual solutions have been proposed, such as the ones being formulated by current scholars and clinicians in the field of interprofessional education such as those at National Center for Interprofessional Practice and Education, a clear cohesive approach remains outside of reach.

The National Academies of Practice (NAP) was founded by Nicholas Cummings, Ph.D., in 1981 as a non-profit organization to advise governmental bodies on our healthcare system. Distinguished practitioners and scholars are elected by their peers from fourteen different health professions to join the only interprofessional group of healthcare practitioners and scholars

dedicated to supporting affordable, accessible, coordinated quality healthcare for all. The primary focus was to bring these practitioners and scholars to produce ideas that could be implemented at local, state and national policy levels. Examples include the following policy papers (see [www.naponline.org](http://www.naponline.org)):

**2014: Toward Interdisciplinary Team Development**

**2010: Prevention, Health Promotion and the Practicing Healthcare Professional**

**2009: Models of Accountable, Coordinated Health Care**

**2008: The Healthcare Workforce**

**2007: Access to Healthcare**

**2006: The Malpractice Mess: Future Directions**

**2005: Privacy of Healthcare Records**

**2003: Health Professions' Role in Preventing Violence**

**2002: Interprofessional Approaches to the Prevention of HealthCare Errors**

**2000: Healthcare in the 21st Century**

Whereas these were excellent attempts at steering healthcare, their impact was difficult to measure. More recently, NAP was involved in Congressional Hearings that allowed the message to be heard at the highest level in congress. The concept was clear; ideas without impact are simply dreaming in a vacuum. With the advent of the Affordable Care Act, it is clear and without doubt that the time has come for interprofessional health care to not be an alternative but the dominant approach to solution to today's health care crisis. The following emerging initiatives are noted:

1. Comprehensive and interdisciplinary assessment and intervention
2. Identification of health care homes with varied participants
3. Shared health record, development and decision making
4. Engagement of the consumer in the preceding

In doing the preceding it is anticipated that the following results will be obtained:

1. Lowering healthcare costs (no government can sustain an industry that exceeds 20% of the gross domestic product)
2. Increased efficiency (chronic diseases should be contained)
3. Increased accountability (fee for service will evolve in to pay for performance)
4. Increased consumer satisfaction (improvement can only occur with the a patient centered approach to healthcare)

This approach not is necessary for the welfare of our patients but for the welfare of our country. If the healthcare would metamorphose from silo to integrated, it is estimated that the US federal budget deficit would be reduced by over \$500 billion in a decade. Interprofessional and integrated healthcare simply makes sense. Its time has come and we are here to usher it forward with the highest quality scholarly journal that bring together the best minds, ideas, research and clinical demonstrations in one location. In doing so, we sincerely believe that the healthcare of our patients and the welfare of our country (and others that participate in this critical social movement) will be healthier and more robust in order to face the many significant challenges that face us a society.

The *Journal of Interprofessional Healthcare* (University of California Press) was published in 2014 by NAP. Last year we published 12 papers that were downloaded over 4,000 times. Despite this success, the NAP leadership believed that more could be done to expand our focus and our impact. The *Journal Interprofessional Education and Practice*, in collaboration with the University of Nebraska, and our publishing partner, Elsevier, brings to the equation much needed scholarly impact. We look forward to realizing our dreams with our readers, contributors, editors, collaborators and publishing house. Towards this end, we ask you to be engaged with the journal as a consumer, reviewer and/or contributor. Without you this shared dream of a better healthcare will not be realized.