**Table 3: Key synthesis findings**

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| **Concepts** | **Second order interpretations** | **Third order interpretations** |
| Logistical and organisational issues that affect facilitators’ work | "Many educators were teaching over and above their allotted timetables and a lack of resources and support with operational issues was evident" (Anderson & Thorpe., 2010; p. 499).  Some facilitators were working in part-time or full-time clinical positions and were able to undertake their facilitation role outside of their normal working hours" (Evans et al., 2014; p. 1054).  "[large cohorts of students] create significant difficulties which impact on staff engagement with IPE" (Rees & Johnson., 2007; p. 552).  "Facilitators enjoyed the flexibility of the facilitation role and more specifically, the fact that the asynchronous aspect of their role could be fitted around other important aspects of their lives (Evans et al., 2014; p. 1054). | The effect of contextual characteristics on facilitation |
| The influence of technology on facilitation | "Even when technology worked smoothly, facilitators were acutely aware of the huge reduction in the non-verbal cues facilitators and participants use to communicate" (Hanna et al., 2013; p. 300).  "Several facilitators described using the technological problems as a learning experience for the students. These facilitators talked about encouraging their student teams to problem solve solutions as to how they might involve team members that were having technological difficulties" (Evans et al., 2014; p. 1054).  "Technological problems in the synchronous environment over time"; "Delayed group formation appeared to be associated with reduced interprofessional collaboration" (Hanna et al., 2013; p. 301).  "Facilitators also mentioned that at times it was difficult to engage some students in the synchronous environment due to a lack of body language cues that are present in the face to face environment". (Evans et al., 2014; p. 1055). |  |
| The need for preparation and support | “Existing staff development opportunities must be well planned and publicised in order to reassure facilitators and those contemplating the role, that adequate support is available and that opportunities exist for sharing knowledge, experiences and ideas" (Rees and Johnson., 2007; p. 553).  "It was felt that the induction allowed facilitators to learn the basic principles of IPL" (Lindqvist & Reeves., 2007; p. 404).  "As many of the facilitators had limited experience […] they emphasized the overall importance of facilitator support" (Evans et al., 2014; p. 1054).  "The [interprofessional] competencies of the clinical tutors must be continually trained and maintained (Jakobsen & Hansen., 2014; p. 411).  "An important factor to consider in the preparation of IPE facilitators is an understanding of the complexities of facilitating different groups of professions due to heterogeneous learning needs as well as histories of interprofessional friction and issues relating to imbalances of power, status and authority" (Egan-Lee et al., 2011; p. 337).  "It was felt that the weekly de-briefing sessions encouraged the facilitators to share experiences and obtain support from one another" (Lindqvist & Reeves., 2007; p. 404). | How facilitator experience influence their facilitation work |
| Collaborating and co-facilitating | "Analysis of the data supported the enhanced value of co-facilitation to enable collaborative online learning in IPE" (Hanna et al., 2013; p. 301).  "The presence of more than one facilitator from different professional backgrounds helped connect different learners’ experiences [and] capture more learning opportunities" (van Soeren et al., 2011; p. 438).  "Forms of support could include co-facilitation opportunities for neophyte and experienced IPE facilitators. In such instances, new facilitators would have the opportunity to observe, mirror facilitation styles, and receive feedback" (Egan-Lee et al., 2011; p. 355).  "For many educators team-teaching, or paired facilitation, enabled the observation of colleagues while teaching". (Anderson & Thorpe., 2010; p. 497).  "All the facilitators had found the experience of working with service users [as co-facilitators] positive and enjoyable, acknowledging the educational value of the programme" (Cooper and Spencer-Dawe., 2006; p. 611).  "A positive side effect of common planning and collaboration was that the tutors got to know each other better individually and professionally, thus enhancing future formal and informal collaboration concerning students’ clinical learning" (Jakobsen & Hansen., 2014; p. 410). |  |
| IPE facilitation as a professional development opportunity | "The facilitators saw the [facilitation] experience as an opportunity for their development of skills as a facilitator of learning, as an IPE facilitator and as an online facilitator" (Evans et al., 2014; p. 1053).  "Facilitators acknowledged increased understanding of other professions [they] developed skills in organisation, communication, teaching, diplomacy, conflict resolution" (Clouder et al., 2012; p. 462).  "Many facilitators noted that their facilitation experiences contributed to improvements in their knowledge of interprofessional concepts and approaches" (Egan-Lee et al., 2011; p. 336).  "Leading the IPE curriculum had brought these educators together in the design and delivery of the curriculum and this has enabled them to further their knowledge of each other’s professions" (Anderson & Thorpe., 2010; p. 496).  "On a personal level, facilitators felt they had gained a valuable learning experience from working with service users in delivering IPE. Following their experiences, they described a number of changes they had made to their own clinical and professional practice to make service users more central to their work" (Cooper & Spencer-Dawe., 2006; p. 612).  “Perceiving that the students were learning was personally satisfying for the facilitators, as they felt they had assisted that process through their facilitating roles” (Evans et al., 2014; p. 1053).  "The opportunity to form new relationships with colleagues and students from other disciplines [was a key benefit of IPE facilitation]. In particular the associations with other professional colleagues had enhanced [facilitators’ own] practice" (Anderson & Thorpe., 2010; p. 498). |  |
| Employing differing approaches to interprofessional teaching | "Facilitators adopted one of two contrasting approaches which contributed to how they facilitated the debrief session. One approach seemed more ‘learner-centric’, while the other approach appeared to be more ‘teacher-centric’ in nature. These differing approaches resulted in contrasting types of interprofessional discussion amongst the learners" (van Soeren et al., 2011; p. 438).  Facilitators employed "a reflective approach [...] as a conscious educational strategy with the intention to let students explore and learn (Carlson et al., 2011; p. 312).  To be effective in their IPL role, facilitators felt that they needed to display a range of [collaborative] attributes such as enthusiasm, humour and empathy (Lindqvist & Reeves., 2007; p. 404).  "Facilitators highlighted the importance of feedback from their students in consolidating their sense of self as professionals, supporting the notion that [inter]professional identity formation is intersubjective, dialogical and relational in nature" (Clouder et al., 2012; p. 463).  "Facilitators should be prepared to minimize the effect of these negative emotions [feelings of fear of failure, and feeling unsafe] by increasing familiarity among participants. Providing ample instruction about what will happen during the simulation and gradual introduction of role-play [...] may create a more comfortable and safe learning climate" (van Soeren et al., 2011; p. 439).  In "breaking down [hierarchical] barriers [facilitators needed to make] the different knowledge domains and professional responsibilities visible and understandable to students" (Carlson et al., 2011; p. 312). | Need to use a range of strategies for effective facilitation |
| Using interprofessional approaches and experiences to enrich the learning | "Most facilitators attempted to infuse their IPL work with the range of important [collaborative] attributes they identified” (Lindqvist & Reeves., 2007; p. 404).  “[Facilitators supported] team work by constantly reminding the students that all decisions regarding patient care had to be decided mutually by the team" (Carlson et al., 2011; p. 312).  Facilitators need to "set up regular interprofessional briefing sessions that focused on clinical and collaborative aspects of their practice" (Chipchase et al., 2012; p. 468).  "Facilitators felt that their previous experiences of […] collaborating in health care teams were helpful to draw upon and inform their work with their student groups" (Lindqvist & Reeves., 2007; p. 404).  "Facilitating interprofessional understanding [...] it was important for students to understand their own profession as well as that of the other team members" (Carlson et al., 2011; p. 311).  "To stimulate enthusiasm and motivation to learn, the burden falls on facilitators to make learners aware of manageable gaps in their knowledge and at the same time heighten the practical relevance [linked to interprofessional collaboration] of the learning experience" (van Soeren et al., 2011; p. 438).  "Facilitators felt that exposing students to one another in small learning groups provided them with a better knowledge of teamwork and also helped improve their interprofessional relationships" (Lindqvist & Reeves., 2007; p. 404). |  |