**Supplement 1. Characteristics of Studies Retrieved** 

Authors Year Country	Aims and Purpose	Population and Sample Size	Methodology Intervention Duration	Key Findings	Gaps in Research Identified
Phillips & Keys <sup>31</sup> 2018 USA	To explore a classroom based elective IPECP course centred on teaching Primary Care (PC) principles and practice considerations to students from 7 different health professions.	84 students across 3 academic course years (Dentistry, n= 7; Medicine, n=16; Nursing, n=11; Pharmacy, n=14; Physician assisting, 9; Public health, n=17; Social work, n=2; 'Other', n=2)	Quantitative; IPECP model: Classroom- based lecture/discussi on, problem- solving activities and a PC clinician observation experience. Duration: 12- week course; single half-day practice observation	Ninety-nine percent of students reported practice observation to be the highlight of their IPECP experience. Seeing primary care principles, real patient scenarios, practice challenges and witnessing care teams at work were most impactful for learning the value of collaborative teamwork.  Students from disciplines outside of traditional 'primary care' (DDS) expressed concerns that their siloed training does not adequately prepare them for IPC and desired more opportunities to learn with other health professions students in their education.	There is a need to develop IPECP that is inclusive of a diverse array of health professions and embedded into the student curriculum.  Research exploring long-term impacts of IPECP on student' readiness for interprofessional collaboration upon entry to practice are needed.
Heath et al. <sup>32</sup> 2019 USA	To implement and evaluate outcomes of a pilot program/clinical	113 students (DDS, n=65; Nursing, n=33, 'Other', n=14 (Pharmacy,	Quantitative; IPECP model: Team-building session (1) and Collaborative	Opportunities within IPECP to use their professional skills in an authentic setting and to see and learn the roles of others were impactful for developing	Early and routine IPECP experiences that provide authentic and immersive scenarios for students are needed.
	service-learning experience for	Social Work, Public Health,	service-	understanding of professional roles and responsibilities and	Increasing hands-on and immersive clinical

	dental and health professions students on students' development of competencies for IPC.	Physical Therapy, Health Communicatio n)	learning experience Duration: 2.5 days	contributions of other health professionals to patient care.  Some students reported feeling like an 'add on' to the IPECP curriculum and could not recognize their role or value to the interprofessional team.	experiences are recommended to bridge gaps between IPECP theory and clinical practice.
Barker et al. <sup>43</sup> 2018 USA	To apply a quality improvement model to the development of an intraprofessional education experience between DH and DDS targeted at preparing students for collaborative practice.	31 DH students (paired with third-year DDS students)	Quantitative; IPECP model: Paired (DH and DDS) clinical experience performing oral assessments and treatment planning oral care needs for patients. Duration: Single-day clinic rotation	DH students the IPECP experience as valuable to their learning and developing mutual understanding with their DDS peers. The IPECP also increased DH students' confidence in communicating and working with other professionals in the future. The experience enabled understanding of the the need and value of collaborative teambased care but DH students desired more active participation in patient evaluation and assessment.	IPECP research needs to include the perspectives of both DH and DDS student groups to inform development of meaningful IPECP experiences. IPECP experiences for students throughout their education, that are aligned lwith authentic expectations of healthcare practice are needed.
Gambacorta et al. 44 2022 USA	To evaluate dental students' perceived competence in interprofessional collaborative practice (IPCP) skills following participation in	185 DDS students (2 cohorts-Fall 2018/19 and Spring 2019/20)	Quantitative; IPECP model: Interprofession al forum discussions and collaborative problem-	Students reported substantial gains in interprofessional skills following participation in the first (Fall) IP Forum. However significant declines (70%) of perceived gains in skills were reported by students in the interim time between Fall and Spring sessions. DDS students	Consistent, long-term IPE activities and opportunities for interprofessional collaboration need to be embedded within students' curriculum to optimize students' IPC skills development.

Ostroski Olsson et al. <sup>54</sup> 2022 Brazil	two IPECP Forums with students from other health professions.  To explore the effects of integrating a community- based service-	38 DDS students (n=30 survey respondents; n=8	solving/case-based activities  Duration: Two forums across two semesters (2.5-3 hours each)  Qualitative; IPECP model: interprofession al community-based service-	were found to not have opportunities to experience and engage in collaborative practice outside of the IP Forums.  The IPECP experience allowed students to better recognize their contributions to an interprofessional team and gain an enhanced valuation of the	Authentic experiences of collaboration with other professions and constructive faculty-led clinical environments are lacking.  There is a need for IPECP experiences that provide OH students exposure to other professions, role models/faculty and
	learning IPECP model into the curriculum of DDS students and perceived impacts on IPC skills development and readiness for team-based healthcare practice.	interviews)	learning clinic experience; interprofession al teams (8 students) led by two faculty members in a primary care setting with practicing professionals. <b>Duration:</b> 4 months (60 hours)	specialized knowledge and role of other professions and teamwork overall. The IPECP facilitated socialization between oral/health professions students which allowed groups to explore conflicts and differences early on that enhanced teamwork. DDS students identified that their curriculum remains largely uni-professional and their clinical learning settings do not reflect collaborative teamwork or provide opportunities to further develop skills learned in IPECP.	collaborative teamwork in practice settings.  IPECP experiences integrated throughout OH students' curriculum is lacking and uniprofessional curricula and clinical training environments persist.
Claiborne et al. <sup>45</sup> 2021 USA	To pilot an online IPECP applied learning activity (ALA)	Pre-test: 73 students (DH, n=38; Master of	Quantitative; IPECP model: online teambased case	Post-IPECP, DH students showed significant improvements in their self-perception as someone who	Development of online IPECP offerings requires increased focus on activities that allow
	between dental	1,145,01	study activity	engages in interprofessional	students to learn about

	hygiene and public health students to understand students' socialization and values towards IPECP and interprofessional teams.	Public Health, n=35)  Post-test: 57 students (DH, n=33; MPH, n= 24)	centred on a community health setting and targeted population.  Duration: not reported	practice and as a leadership within a team. However, no changes were observed in students' valuation of the opinion of others and value of sharing research evidence across disciplines in a team setting. Core competency domains such as, roles and responsibilities, and interprofessional communication	roles/responsibilities and develop communication skills.
Price et al. <sup>7</sup> 2021 Canada	To longitudinally explore processes of professional identity development and the early expectations/ perceptions interprofessional collaboration(IP C) amongst health professions students in IPECP during their first program year.	Timepoint 1: 44 students (first-term interviews) (DDS: n=5; Medicine: n = 12; Nursing: n= 10; Pharmacy: n= 8; Physiotherapy: n=9 Timepoint 2: 39 students (first-year interviews) (DDS: n=4; Medicine: n = 12; Nursing: n= 9; Pharmacy: n=	Qualitative; IPECP model: Multi-model and blended cohort activities; case-based and treatment planning activities; simulated practice, clinical observation and experiential clinical practice. Duration: varied across 1 academic year	did not improve in this study.  A lack of understanding of their own chosen profession was an impediment to learning about others early in their program. By end of final year, students demonstrated increased understanding of IPC and early development of an interprofessional identity.  Exposure to professional role models, socialization and collaborative experiences in clinical settings/simulation simulated experienced were most impactful for students interprofessional socialization.	Professional and interprofessional socialization and identity formation develop overtime and require attention to the timing and sequencing of students' IPECP experiences. Consistent experiences of collaboration are needed throughout students' prelicensure education programs to developing collaborative skills, attitudes and behaviours for interprofessional practice.

Claiborne et al. <sup>33</sup> 2020 USA	To pilot a service-learning IPECP experience targeted at pediatric oral health delivery amongst DH and Nurse Practitioner students and to assess impacts on professional socialization.	7; Physiotherapy: n=7)  12 students (DH, n=9; Nurse Practitioner, n=3)	Quantitative; IPECP model: Innovative collaborative service- learning (ICSL) experience; blended format- online activities/ oral health education plan and content development followed by in- person educational plan delivery and clinical experience Duration: not	Students reported a high valuation of collaboration following their ICSL experience. Both cohorts reported working as a team and collaborative decision-making to be valuable. However, post-test responses indicated that all students scored their lowest level of agreement with the statement that practicing as member of an interprofessional team is preferred over uni-professional practice. Disagreement level was highest amongst DH students.	Further research is needed that includes longitudinal study design to understand how changes in beliefs, attitudes and values of students' changes over time and with repeated/prolonged experiences in IPECP. The types of IPECP activities used in DH education are not well-documented, limiting understanding of how IPECP is occurring and how DH students are educated in IPC.
Infante et al. <sup>46</sup>	To explore an	48 students	reported Mixed	Student pre-and post-IPECP	Sustained and consistent
2015	IPECP	(DH, n=12;	methods;	agreed that teamwork was	exposure to IPECP and
USA	experience with	DDS, n=12;	IPECP model:	important and should be part of	other professions in
1	students from	nursing, n=12;	Facilitated	their clinical training. Students	settings that reflect
	four health	medicine,	team-building	reported higher self-confidence	authentic clinical practice
	professions	n=12)	exercises,	in their professional role and	are needed. Longitudinal

	working together on a service-learning project and impacts on students' knowledge and appreciation of each other/ other professions and valuation of IPC.		collaborative population assessment and treatment-planning activities. <b>Duration:</b> Five weekly 4-hour sessions	improved understanding of the roles and responsibilities of others post-IPECP participation. Facilitated 'get to know each other' activities at the outset of the IPECP experience were important socialization and team-bonding experieces. Student across all four professions reported this IPECP experience to be their first longitudinal experience in a clinical setting with others.	research is needed to improve understanding of IPECP impacts on students' attitudes, beliefs and behaviours toward teamwork and IPC.
Thompson et al. <sup>34</sup> 2016 USA	To evaluate for changes in the interprofessional attitudes of students from 13 health professions throughout their experience in a blended classroom/ team-based clinical IPECP	80 students (n = 4-8 students from each profession. (DDS, DH, physician assisting, medicine, nursing, pharmacy, occupational therapy, physical	Quantitative; IPECP model: Classroom- based blended cohort sessions (team building and case-based activities) and collaborative service- learning clinical	clinical setting with others.  Increases in students' perceptions of interprofessional team members, relationships, and communicating with others in clinical scenarios were reported following the service- learning experience. Over time, and with increased exposure to working within interprofessional teams, student perceptions of healthcare teams evolved. Greater inclusion of oral health was reported and OH students	Longitudinal IPECP curriculum that blends didactic theory, informal socialization opportunities, and authentic practice experiences are required. Longitudinal research is needed on IPECP in the health professions to explore impacts of prolonged interprofessional group contact on students'
	experience.	therapy, language pathology, nutrition sciences, social work and public health)	experience (interprofessio nal teams of 10 students)  Duration: Two academic	reported enhanced perceptions of themselves as an interprofessional team member post-IPECP.	socialization, team building and collaboration skills.

Caratelli et al. 35 2020 USA	To explore an IPECP course aimed at preparing health professions for IPC and improving collaboration between professions using a blended format of classroom-based seminars, and experiential learning in a community-based service-learning clinic.	9 students (DDS, n=3; Kinesiology, n=3; Pharmacy, n=3)	semesters; Fall (4x 4-hour classroom-based sessions) and Spring (4x 4-hour clinical patient care experiences)  Quantitative; IPECP model: blended cohort course; classroom-based sessions and service-learning clinical experiences within an interprofession al team.  Duration: 14-week curriculum (5x 90-minute seminars; 4 x 4-hour clinical experiences)  Quantitative;	Student from pre-test to post-test demonstrated increased knowledge and abilities across core IPC competency domains including interprofessional communication, values/ethics, roles and responsibilities and teams and teamwork. Post-test results found that following the IPECP experience, students reported increased comfort working with an interprofessional team and reported the clinical site component was valuable to their learning and interest in interprofessional practice.	A need for more IPECP curriculum design that moves beyond didactic classrooms/theory to include practical application and experiential learning is identified. Research centred on individual experiences of IPECP including the qualitative exploration of students' personal preconceptions of IPECP and collaborative teamwork are limited.
Alexander <sup>36</sup> 2022 USA	effect of a simulation- based IPECP activity on	(DH, n=35; nursing, n=45)	IPECP model: online course module and IPECP	Pre-IPECP survey results indicated students had a high regard for IPC prior to the simulation activity and aware of	health and health professions is needed to improve understanding of the oral-systemic

	dental hygiene and nursing students' attitudes about interprofessional collaboration (IPC).		simulated practice activity <b>Duration:</b> not reported	the importance of collaboration. Across IPC domains, student scores improved following the IPECP experience with the exception of interprofessional value. Students demonstrated an enhanced ability to apply teambased approaches to patient-centered care and use effective communication and team leadership following participation.	implications of disease and to promote inclusive healthcare teams in the future. Longitudinal, and multiple IPECP experiences throughout students curriculum are recommended and collaboration across health faculties is needed to support the creation and implementation of authentic and meaningful experiences.
Otsuka et al. <sup>37</sup> 2016 Japan	To develop, implement, and evaluate a peer-led simulation-based IPECP program in which dental hygiene students instruct medical and dental students on oral health care for older patients in long-term care.	184 students (DH, n=22; DDS, n=110; Medicine, n=52)	Quantitative; IPECP model: Simulated patient and clinical peer- teaching activities. Duration: Not reported	DDS and medical students reported the DH-led peer-teaching sessions to enhance their knowledge about the role and responsibilities of other professions. Students reported a better understanding of the need for collaboration and value of working interprofessionally for patient care. Students reported that the IPECP allowed for learning experiences that could not happen in the classroom.	Increasing practical clinical experiences between oral and health professions students is needed. Simulation-based IPECP is recommended as strategy to better prepare students and teams for collaborative patient care. Development of longitudinal IPECP experiences and peerteaching opportunities are warranted to improve understanding of roles and collaboration to support IPC in practice.

van Diggele et	To explore	1674 students	Quantitative;	Student responses were analyzed	Increased exploration of
al. <sup>38</sup>	students'	from 11 health	Quantitudi ( o,	by health discipline. DDS	patient-centered case-
2021	experiences of	disciplines	IPECP model:	students identified the most	based IPECP activities is
Australia	participation in	(Dentistry,	Mixed-cohort	beneficial aspects of the IPECP	warranted to understand
	an	n=30)	teams in a	as: opportunities for peer	impacts on healthcare
	interprofessional		case-based	learning and collaboration,	students' skills in
	case-based		learning	informal networking and	interprofessional
	learning activity		activity (min. 4	socializing with other health	teamwork. IPECP
	and to identify		health	professions students, and	experiences that are
	perceived value		disciplines per	opportunities to practice	inclusive of multiple
	of the		team)	working in an interprofessional	professions and represent
	experience for		,	team.	authentic experiences of
	students across		<b>Duration:</b> Not	Students reported that the case-	practice are needed to
	eleven health		reported	studies lacked relevancy for	enable learning and
	disciplines.			certain professions and DDS	understanding of
				students reported the highest	professional roles,
				dissatisfaction with cases for	collaborative skills and the
				relevancy and applicability to	value of collaboration in
				their professional knowledge	practice.
				and skills.	
Luebbers et	To explore the	314 students	Qualitative;	The IPECP experience was	Early and staged IPECP
al. <sup>39</sup>	experience of	(medicine,	IPECP model:	found to be impactful for	experiences that begin
2022	students in an	dentistry,	Classroom-	students' across 3 themes: 1)	with basic
USA	interprofessional	social work)	based	appreciation of similarities and	interprofessional learning
	classroom-based		interprofession	differences between professions,	and skill-building to
	interactive		al workshops;	2) recognition of the	enhance experiential team-
	workshop		Mixed-	contributions and importance of	based IPECP experiences
	through analysis		profession	different professions in patient-	and students' professional
	of written		student groups	centered care and 3) for	development are needed.
	reflections.		activities.	understanding their own	
			Duration:	professional role. Catalysts for	Research is required on
			Two-academic	student learning were	IPECP activities that
			terms	identified as opportunities for	include interpersonal

			(Fall/Spring); single event 2.5-hour duration	consistent socialization and bonding as a group and case-based learning exercises that reflected authentic practice scenarios. Exercises featuring role-play/practice simulation were found to best engage students in direct dialogue, exploring interprofessional teamwork, conflict resolution and working towards a common goal.	conflict scenarios and purposeful case design to be inclusive of needing collaboration from all team members/professions.
Rivera et al. <sup>40</sup> 2018 USA	To explore use of an interprofessional standardized patient exercise (ISPE) with health professions students for developing understanding of professional roles, interprofessional collaboration and contributions of IPC to patient care.	520 students (Dentistry, n= 93; Physical therapy, (n =46; Medicine, n=138; Nurse practitioner, n=86; Pharmacy, n=116; Social work, n=7; Nutrition n=20; Chaplaincy n=14)	Quantitative;  IPECP model: ISPE using interprofession al teams of students for a collaborative case-study exercise  Duration: single event (3 hours); preceded by a programmandated foundational course on IPC principles.	The ISPE case-study experience was highly valued by students, reporting an appreciation for the interactive qualities of the exercise. Observing other professional students interacting with the SP and opportunities to experience the professional scopes and knowledge of others to care planning and delivery was an impactful for learn about other professions and developing an appreciation for their contributions to patient care. Participants desired more IPECP experiences like this as part of their education.	Further exploration of ISPE experiences for developing IPC competencies in health of expertise and collaborative opportunities is required. Intentional IPECP case studies that showcase the professional knowledge and skills of all professions is needed for students to recognize and complementary areas of expertise and collaborative opportunities. experiences integrated throughout students'
Kersbergen et al. <sup>51</sup>	To evaluate the perceptions of	100 students	Qualitative;	IPECP clinical experiences enabled students' understanding	Early and consistent IPECP is required

2020	DDS and DH	Timepoint 1	IPECP model:	of professional roles and	throughout education
Netherlands	students on	(program	Oral health	responsibilities in practice and	programs to improve
	professional	completion)	clinical	for fostering mutual	students' understanding of
	roles and IPC	(DDS, n=62;	practice	understanding between the	team-based collaboration
	following	DH, n=38)	Interprofession	professions that contributed to	and to develop IPC skills,
	participation in a	Timepoint 2	al teams of 12	collaborative attitudes in	attitudes and behaviours
	4-month	(2-years post-	students (DDS:	professional practice. However,	for practice. IPECP
	curriculum	graduation)	8 DH)	limitations for long-term impacts	curriculum and
	embedded	53 oral health	responsible for	of the IPECP experience for IPC	experiences that better
	clinical IPECP	graduates	co-	in practice was attributed to	reflect real-world clinical
	experience and	(DDS, n=27;	management	students' only beginning to	practice are required.
	again 2-years	DH, n=26)	of patients'	experience and understand	Longitudinal IPECP
	post-graduation.		collaborative	interprofessional collaboration in	research is limited and
			oral healthcare	their final program year. At final	needed to understand the
			delivery.	follow-up, participants reported	evolution of students'
			<b>Duration:</b>	challenges for enacting	professional socialization
			4-month	interprofessional collaboration in	and impacts for IPC in
			rotation;	practice as they identified few	practice.
			1x/week	role models for collaboration in	
** ** 1.47		22 77	201	practice.	
Kanji et al. <sup>47</sup>	To explore	23 DH	Mixed-	Post-IPECP, students had	Research exploring the
2020	dental hygiene	students	methods;	increased understanding of their	experiences of dental
Canada	students'		IDECE II	professional role and showed	hygiene students' in IPECP
	readiness for		<b>IPECP model:</b>	positive development of learning	and their perceptions and
	interprofessional		Classroom-	a professional identity.	attitudes towards
	learning and		based	Students were more open to	interprofessional learning
	collaborative		workshops	developing clinical-based	and collaborative practice
	practice		using team-	problem-solving skills with	remains limited.
	following a 4-		based learning	other professions post-	More research on
	week IPECP		(blended	intervention. Focus group	integrated IPECP
	curriculum with		cohort teams)	revealed impacts of the	curriculum and
	students from 11		Duration:	experience on learning and	longitudinal outcomes to
			Four in-person	attitudes post-intervention such	better understand IPECP

Colonio	other health programs.  To explore and	132 students	workshops (1/week; 2- hours) over 1 month.	as: greater role clarification, recognition of shared and complementary knowledge bases and practice with other professions, and enhanced cultivation of a professional identity, collegiality, and respect for other professions.  The majority of students had	impacts on students and their development of collaborative behaviours, attitudes and readiness for collaborative-practice are required.  Siloed education of oral
Salazar et al. <sup>48</sup> 2017 United Kingdom	compare, the attitudes of students trained at a dental institution towards dental interprofessional education.	(DDS, n=80; DH/Dental therapy, n=38; Dental nursing, n=14)	IPECP model: Clinical experience in a team-based oral health clinic; blended-cohort classroom- based tutorials, and case discussions. Duration: 8 weeks	positive attitudes towards IPECP and believed shared learning was beneficial for teamwork and collaboration to gain skills and professional relationships.  DH and dental therapy students reported a stronger sense of a professional identity and significantly higher preference towards an 'inclusive approach' to learning compared to dental students. DDS students were found to have a higher preference for an exclusive professional identity when compared with other students and a higher valuation of profession-specific learning.	health professions persists creating barriers for students' development of collaborative skills and valuation of collaborative practice. Integrated IPECP experiences in oral health education and more research on the impacts of shared clinical experiences between students to understand impacts on professional identity development is needed. More qualitative research is required to explore students' attitudes towards IPECP in more detail.
Howey & Yoon <sup>56</sup>	To explore IPECP	40 DH students	Qualitative;	DH students had positive and negative perceptions of their	Increased integration of longitudinal IPECP

2022 Canada	programming in DH and DDS		IPECP model: Rural	IPECP experience. Students reported benefits from	experiences throughout students' pre-licensure
	programs with a		setting; IPC	collaborating with others in an	education and consistent
	focus on examining the		clinical practice	authentic setting that reflected 'real' practice. Students	exposure to other team members and opportunities
	experiences of		experience	expressed that their preparedness	for socialization are
	DH students in a		("the satellite	for IPC in practice would have	needed.
	IPECP clinical		rotataon").	benefitted from more consistent	Research is needed to
	experience with		,	and longitudinal exposure to	explore historized
	DDS students		DH $(n=2)$ and	realistic clinical experiences	professional hierarchies,
	and impacts for		DDS (n= 2) students live	with DDS students to learn their	stereotyping and how they
	understanding roles, addressing		together and	professional role and working.  DH students reported the IPECP	may be reinforced in oral health education as part of
	professional		work	improved their confidence and	students' professional
	hierarchies and		collaboratively	combatted sentiments of feeling	identity development.
	building IPC		in this practice	less knowledgeable than other	J 1
	skills.		setting for a 2-	health professions. Time for	
			week duration	socialization and connection	
			during their	enhanced collaboration and	
			final year of training.	teamwork in practice.	
			danning.		
			<b>Duration:</b> 2 x		
			2-week long		
			rotation in		
			satellite		
Reinders &	To explore	88 students	setting. Quantitative;	More effort in team-based	Comparing online versus
Krijnen	whether	(DDS, n=47;	Qualiticative,	collaboration was found in the	in-person education
2023 <sup>11</sup>	interprofessional	DH, n=41	IPECP	high interprofessional identity	settings for
Netherlands	identity is a		Model:	groups and findings suggest that	interprofessional
	source for		Online IPECP	interprofessional identity	socialization and
	intrinsic		course	partially determines	interprofessional identity

	motivation towards interprofessional collaboration and team membership.		employing collaborative team-based discussion on pre-determined questions related to professional roles/responsib ilities and collaborative practice <b>Duration:</b> 2-weeks (3 team meetings and a	interprofessional group efforts. Higher group identity was associated with higher group performance. High interprofessional identity amongst students was correlated with willingness to collaborate, asking questions of others, more equal communication and mutual engagement between members. Social interaction was found to enable team formation however the extent of socialization may have been impeded owing to online format	formation is underexplored and research needed to clarify impacts on interprofessional identity formation. Evidence is lacking on the interplay between interprofessional identity, settings and individuals' professional skills/ competency as mutual predictors for enabling IPC and effective teams in practice.
			debriefing session)	of the IPECP experience.	
Rothmund et	To evaluate the	36 students	Mixed	The IPECP experience	Direct impacts on
al. <sup>49</sup>	effect of an	(DH, n=25;	methods	contributed to DH and PA	interprofessional identity
2017	IPECP	PA, n=11)		students' knowledge	development could not be
USA	education		IPECP model:	development on the module	determined in this study.
	module on DH		Classroom-	topic and provided valuable	Repeated and integrated
	and physician		based	opportunities for socialization.	IPECP experiences
	assistants (PA)		workshop;	Experience working within a	between students in the
	students'		team-based	team strengthened students'	oral health, medical, and
	knowledge of		case-study/care	confidence communicating with	primary care fields and
	oral		planning	other disciplines and positively	research that follows
	manifestations of menopause		exercise using a standardized	influenced their perceptions of collaborative teamwork.	students longitudinally to explore impacts of long-
	and confidence		patient (SP),	Students reported an improved	term exposure to IPC on
	treating		followed by a	understanding of the	professional/interprofessio
	conditions in the		debriefing	professional roles and	nal identity development
	context of		session.	responsibilities of each	

Storrs et al. <sup>50</sup> 2023	collaborative care planning and interprofessional teams. To qualitatively evaluate and	46 students	Duration: 3-hours  Qualitative; IPECP model:	profession in patient care and improved attitudes and perceptions toward IPC.  Improved confidence in collaborating with other	during their programs is required.  IPECP experiences
Australia	explore the contextual factors relating to positive outcomes of oral health students' experiences in an interprofessional team-based treatment planning (TBTP) program.	(DDS, n= 20; Dental technology, n=15; Oral health therapy, n=4; Dental prosthetics, n=7)	Collaborative team-based treatment planning (TBTP) activities and clinical patient care.  Duration: not reported	collaborating with other students, self-assurance in their profession specific and interprofessional roles and improved teamwork skills post-IPECP was reported. Students valued opportunities to socialize and to learn from others. The majority of students reported that team activities facilitated understanding of overlapping and complementary knowledge bases. A minority of DDS respondents felt IPECP was an interference to their training and favoured learning profession-specific skills for practice rather than interprofessional collaboration.	threaded throughout students' education and which include socialization opportunities and group work, leading into team-based experiences in simulation/practice are needed. The degree to which TBTP experiences during education may impact or change attitudes and behaviours towards interprofessional collaboration upon entry to practice remains to be explored.
Kersbergen et al. 55	To explore changes in	424 students (DH, n=221;	Quantitative;	Attitudes of DH and DDS	More research in settings where OH students have
2023 Netherlands	attitudes held by students in the oral health professions on interprofessional learning and	DDS, n=203)	Student-run dental clinic rotation (SRDC) within blended cohort	students towards interprofessional collaboration were almost equally positive at baseline. After one year in an SRCD IPECP model, DH students demonstrated a	opportunities to learn and work together in a team dynamic are needed to compare the effects of IPECP and students' experiences and

	11 1				
	collaboration		teams (5	significantly higher valuation of	perceptions of
	following a one-		DH/11 DDS)	collaboration and teamwork than	collaboration.
	year experience		and classroom-	DDS students whose attitudes	Research is needed on
	in a student-run		based team	did not change over time.	impacts of faculty role
	dental clinic		treatment	Differences were potentially	models in IPECP on
	(SRDC).		planning	attributed to unequal	students' experiences and
			sessions.	participation opportunities	perceptions of
			<b>Duration:</b>	between professions owing to	collaborative practice.
			2.5 days/week	increasingly overlapping scopes	
			for 1 academic	between DH and DDS.	
			year.		
Numasawa et	To explore the	378 students	Mixed	All professions with the	Increased development of
al. <sup>41</sup>	readiness of	(DDS, n=92;	methods	exception of DDS students	IPECP experiences that are
2021	dental, medical,	Medicine, n=		showed improvements across	inclusive and designed
Japan	and nursing	190; Nursing,	IPECP	IPC domains following	with cases and
	students for	n=96)	model: IPECP	participation. Focus group	opportunities for all
	interprofessional		workshop	follow up with DDS found	students to contribute their
	learning before	Focus groups	using	students had a low valuation of	professional skills and
	and after IPECP	with DDS	interprofession	interprofessional collaboration	knowledge are needed.
	workshops and	students only	al teams of 7-8	and perceived dentistry as a	Increasing opportunities in
	to identify	(n=17)	students to	profession that does not require	OH education for students
	readiness		discuss and	IPC. Students indicated they had	to experience and observe
	differences and		collaboratively	no prior exposure to	interprofessional
	rationale for		problem-solve/	collaboration with other	collaboration and
	disparities		formulate care	healthcare professionals in their	experience scenarios that
	between		plans for	education and that IPECP	reflect real-world practice
	professions.		simulated	workshop activities were not	are needed to support
			clinical	relevant to their professional	interprofessional identity
			scenarios.	practice or reflective of their	development.
				interpretations of real-world	_
			<b>Duration: 2-</b>	practice.	
			days (8 hour)		

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Langford et al. <sup>42</sup>	To assess the	160 students	Quantitative;	Participation in the IPECP	Development of inclusive
	impact of an	from 6 health	IDE CD	contributed to improvements in	IPECP programming that
2020	IPECP session	professions.	IPECP	students understanding of their	reflects the knowledge and
USA	on opioid use	(pharmacy,	model:	own professional role and those	skills of all professional
	and acute pain	dentistry,	Classroom-	of others. Discussing patient-	learners is needed.
	management on	nursing,	based	centered care strategies as a	Research on longitudinal
	pre-licensure	medicine and	workshop	team improved communication	IPECP experiences for
	healthcare	'other'	involving case-	skills development. Students	students throughout their
	students'	professional	based, faculty-	valued social opportunities with	education are required to
	perceptions of	schools	facilitated	other students and learning about	better understand
	IPC and to	[prosthetics	learning	other professions through peer-	contributions of IPECP for
	evaluate	and orthotics,	activities in	discussion. The hospital-based	improving skills and
	achievement of	public health]	interprofession	case-study was found to be less	knowledge across IPC core
	interprofessional		al teams (8-10	engaging for students from	competencies.
	core		students)	public health and dentistry.	
	competencies.		,		
	1		Duration:		
			2 sessions (110		
			minutes)		
McGregor et	To identify DDS	62 students	Quantitative	Both DH and DDS cohorts	OH students continue to be
al. <sup>52</sup>	and DH	(DH, n= 16;	IPECP model:	reported more positive	educated siloes, impeding
2018	students'	DDS $n=46$ )	Classroom-	perceptions of IPECP following	their identity as
USA	attitudes		based small	course completion.	interprofessional
	regarding IPECP		group/team	Greater positive changes in	practitioners.
	following		activities	attitudes towards collaboration	Research is needed to
	completion of an			were found amongst DH than	explore ways in which pre-
	IPECP course		(blended	DDS students. DDS student	existing professional
	involving health		cohort/5-6 to	scores only improved under the	stereotypes and
	professions		students per	'understanding roles and	professional biases may be
	students from 4		team)	responsibilities' post-IPECP	reinforced in oral health
	other health		including	experience and showed a greater	education and implications
	professions.		case-studies,	affinity for a profession-specific	for their development of
	professions.		group	anning for a profession-specific	team-based attitudes, skills
			discussion		team-based autudes, skills
			_ =:50400:0::		

			and a team video essay on IPC and benefits to patients.  Duration: 13 x 60-minute session	identity and approach to practice.	and perceptions of collaborative practice.
Reinders et al. <sup>53</sup> 2018 Netherlands	To investigate whether comparative versus reflective feedback on interprofessional interaction is effective for decreasing the degree of profession-based dominance in mixed profession groups.	114 students (DDS, n= 57; DH, n=57)	Quantitative; IPECP model: 19 mixed- professions teams (3 DDS, 3 DH) involved in team development activities and interprofession al care planning sessions (virtual- patient) Duration: 4 hours (2 x 2- hour sessions)	Comparative feedback on interprofessional interaction within mixed-profession groups was found to reduce general dominance between professions. OH students were found to communicate more equally following the IPECP based on group identification. Findings support the theory that intergroup formation and comparison can enhance cohesion and cooperation; precursory behaviours for development of an interprofessional team culture and identity formation.	Changes in interprofessional communication observed between professions cannot determine interprofessional identity development vs. temporary group identity. Longitudinal research is needed to determine whether repeated exposure to this type of intervention may influence professional identity formation and may facilitate the integration of an interprofessional identity as part of individual's professional identity.

Legend of acronyms:

**IPECP-** Interprofessional education for collaborative practice

**IPC-** Interprofessional collaboration

**DDS-** Doctor of Dental Surgery (Dentistry Students)

**DH-** Dental Hygiene (DH Students)

**TBTP-** Team-based treatment planning

ICSL- Innovative collaborative service-learning

ALA- Applied learning activity

OH- Oral health