Interprofessional Partnerships

Understanding Roles and Responsibilities
Interprofessional Education occurs
When two or more professions learn with, from, and about each other in order to improve collaboration and the quality of care (CAIPE 1997, revised 2002)

Collaborative Practice
can positively impact current health issues such as:
- Wait times
- Healthy workplaces
- Health human resources
- Patient safety
- Rural and remote
- Chronic disease management
- Population health and wellness. (CIHC, 2010)
The Nature of Collaboration

Figure:
Models of Health Assessment

Parallel Practice:
Individual Disciplines → Health Care Assessment → Plan of Care
Minimal communication among disciplines

Multidisciplinary Practice:
Individual Disciplines → Health Care Assessment → Plan of Care
Increased collaboration and communication among disciplines

Interdisciplinary Practice:
Individual Disciplines → Health Care Assessment → Plan of Care
Interdependency in decision making among disciplines
Benefits of collaborative practice include:

- Using appropriate language when speaking to other healthcare providers or patients/family

- Understanding that all healthcare providers contribute to the team or collaborative unit

- Showing respect and building trust among team members

- Introducing new members of the team in a way that is welcoming and gives them the information they need in order to be a contributing member

- Turning to colleagues for answers

- Supporting each other when mistakes are made, and celebrating together when success is achieved

(CIHC, 2010)
What are Our Challenges

- Silo approaches
- Respecting professional identities
- Logistical considerations
- Resistance to change
- Bridging learning and practice environments
Interprofessional Partnerships

“Health professionals must work interdependently in carrying out their roles and responsibilities....with an appreciation of each professions unique contributions to health care.”

(O’Neil and the Pew Health Professions Commission, 1998)
Interprofessional Partnerships

Different health care professions have evolved under their own and society’s historic forces and ongoing sociological processes.
Interprofessional Partnerships

- Each profession has struggled to define its identity, values, sphere of practice and role in patient care.

- This has led to each health care profession working within its own silo to ensure its members (its professionals) have common experiences, values, approaches to problem-solving and language for professional tools.

(Professional cultures as Barriers, Hall)
Interprofessional Partnerships

- Physicians are trained to assume responsibility for decisions.

- Chronic care, geriatrics, mental health and palliative care, however, are areas where patients’ needs are so complex, interprofessional teams have become necessary to provide the full spectrum of care.
Interprofessional Partnerships

Interprofessional team members have areas of overlapping competencies and must share varying degrees of responsibilities. This often leads to “role blurring” due to confusion as to where one’s practice boundaries begin and end.

(Falk 1977; Mariano 1999)
Interprofessional Partnerships

Gaps:
Can impact on safety and quality of care

Overlaps or redundancies:
Can impact on access, efficient use of resources and consistencies among professionals
Interprofessional Partnerships

According to one physician the goal is to ensure:

“that everybody takes advantage of everybody else’s skill and strengths so that the people we are trying to serve get the best kind of care and services that they can and that it is not withheld just because there are people concerned with overstepping turf and boundaries... working towards the same goal... work together collaboratively around problems that arise.... we respect each other.” (Building Better Teams: A Toolkit for Strengthening Teamwork in Community Health Centres)
Great partnerships — share common goals.
Interprofessional Communication

Conflict Resolution
Interprofessional Communication

- Professions have different value systems instilled during the training process.

- Each of these professional values can create communication barriers between the professions.
Interprofessional Communication

New professionals begin their careers with interprofessional barriers of unfamiliar vocabulary, different approaches to problem-solving, and a lack of common understanding of issues and values.

Communication skills that are taught to students usually focus on interactions with patients and families from the perspective of his/her profession, not on communication across professions.
Interprofessional Communication

A willingness to collaborate, trust, communicate with others and demonstrate respect are necessary for collaboration to work.
Interprofessional Communication

“Just putting people together to work does not necessarily produce effective teamwork.”

Interprofessional Communication

Every team needs a clear sense of purpose.

A clear sense of what our role is, ... for being mediators between the health centre and the community that we serve...

(Building Better Teams: A Toolkit for Strengthening Teamwork in Community Health Centres)
Interprofessional Communication requires:

- Developing trusting relationships
- Actively listening
- Communicating to ensure common understanding of care decisions
- Developing shared goals, shared care plans
Interprofessional Communication

Modes of communication include:

- Written
- Verbal
- Body language
- Unspoken understanding
- Cultural and Environmental cues
Interprofessional Communication

Successful interprofessional team functioning appears to be associated with efforts to ensure that staff are involved in critical decisions.

This does not always imply consensus.

(Building Better Teams: A Toolkit for Strengthening Teamwork in Community Health Centres)
Interprofessional Communication

“Wouldn’t it be nice if all the members of a team treated each other respectfully at all times, agreed on everything, knew and accepted their roles from the outset, had no conflict and no stress?”

(Bill Cole, MS, MA. Founder and CEO Procoach Systems, Silicon Valley, California www.mentalgamecoach.com)
Conflict Resolution

“Conflict resolution is always challenging… We all tend to shy away from conflict and sometimes conflict is good. Because it means that something is wrong and there needs to be change. So I think that a healthy team is sometimes gonna experience conflict…”

Conflict Resolution

Sources of conflict:

- Poor communication
- Individual values, beliefs, personalities
- Philosophies of practice
- Modes/methods of practice
- Differing interests
- Scarce resources
- Power imbalance
“if you acknowledge where the power lies. If it is brought out on the table and set forward, and say you know that you are all going to talk about this but the ultimate decisions going to be in so and so’s hands....then people know what is going on and you know...that can be very liberating and people feel freer to express themselves.”

(Building Better Teams: A Toolkit for Strengthening Teamwork in Community Health Centres)
Strategies for Decision Making

(Building Better Teams: A Toolkit for Strengthening Teamwork in Community Health Centres)

- Unanimous
- One person decides
- Compromise
- Multi-voting
- Majority Voting
- Consensus
Conflict Resolution

Age, culture and gender all have an effect on how people engage in decision-making. Politeness, assertiveness and the importance of maintaining harmony in relationships vary by culture. (Building Better Teams: A Toolkit for Strengthening Teamwork in Community Health Centres)
Conflict Resolution

- Poor communication is one of the most pervasive barriers to conflict resolution.

- Communication between teams, sites and all levels of staff has become a challenge.
Conflict Resolution

Fatigue, stress and chaotic work environments can cause team members to retreat into their individual professional silos, where there is safety, clear limits, recognition of professional value and license to work autonomously.
Conflict Resolution

The demand for patient or client care and community involvement continues to grow and competes with meeting time, yet, not having the time to meet undermines the effectiveness of collaboration.
Conflict Resolution

They may not understand each other’s role well, so you might have a perception that this person does not appreciate what I do...when it’s really not that...you know the person doesn’t quite understand what you do.

(Building Better Teams: A Toolkit for Strengthening Teamwork in Community Health Centres)
Conflict Resolution

• Shared values are the result of listening, appreciating, building consensus and practicing conflict resolution.

• For people to understand the values and come to agree with them, they must participate in the process: unity is forged, not forced.

(Building Better Teams: A Toolkit for Strengthening Teamwork in Community Health Centres)
The following collaborative skills are essential for effective teamwork (Norsen et al., 1995):

- Cooperation
- Assertiveness
- Responsibility
- Communication
- Autonomy
- Coordination
Conflict Styles


- Avoiding
- Accommodating
- Compromising
- Competing
- Collaborating
Patient/Family Centered Care

Shared Decision Making
Patient-Centred care

- means that the patient/client (and their family, if applicable) is at the centre of their own health care.

- involves listening to patients and families and engaging them as a member of the healthcare team when making care decisions.

- does not mean patients get exactly what they ask for, but rather that patients are working with their healthcare providers to determine health goals that are realistic and achievable.

CIHC 2010
Patient-Centred care

When the patient is at the centre, the healthcare system revolves around their needs rather than the needs of healthcare providers, fiscal pressures or space allocation.
Patient-Centred care:

• Requires a balance between the professional knowledge of care providers and the personal knowledge of the patient and their family

• Ensures the patient is listened to, valued and engaged in conversation and decision-making about their own health care needs

• Focuses on the patient’s goals and the professional expertise of the team

• Adds the knowledge of all team members to the patient’s self-knowledge and self-awareness.

CIHC 2010
Patient/Family Centered Care

Care plan goals belong to the patient

Are your patients considered a member of the team?
Health Care Deja vu

So, what seems to be the trouble today?

So, what seems to be the trouble today?

So, what seems to be the trouble today?

Oh for Pete's sake! Don't these people ever talk to one another?!
Collaborative patient centered practice:

- is designed to promote the active participation of each discipline in patient care.
- enhances patient and family centered goals and values
- provides mechanisms for continuous communication among care givers
- optimizes staff participation in clinical decision making within and across disciplines
- fosters respect for disciplinary contributions of all professionals

Health Canada 2003
Collaborative Practice

- occurs when healthcare providers work with people from within their own profession, with people outside of their profession and with patients/clients and their families.

- requires a climate of trust and value, where healthcare providers can comfortably turn to each other to ask questions without worrying that they will be seen as unknowledgeable.

When healthcare providers are working collaboratively, they seek common goals and can analyze and address any problems that arise.

CIHC 2010
Patient/Family Centered Care

Collaboration is the most common descriptor of teamwork in healthcare, but are we truly collaborative....
Key Principles of Collaboration

Sharing

• Responsibilities
• Planning, intervention and decision making
• Health care philosophy
• Professional perspectives
Key Principles of Collaboration

Partnership

- Two or more individuals
- Collegial-like relationship
- Open and honest communication
- Mutual trust and respect
- Each partner values the work and perspectives of others
- A common goal or set of shared goals
Key Principles of Collaboration

Interdependency

• Mutual dependency
• Interdependent rather than autonomous
• Individual contribution is maximized
• Output of the whole becomes much larger than the sum of the inputs of the parts
Key Principles of Collaboration

Power

- Shared between team members
- Simultaneous empowerment of each participant whose power is recognized by all
Patient Centered Primary Care Collaborative
“Purchaser Guide” Released July, 2008

The Patient-Centered Medical Home
A Purchaser Guide
Understanding the model and taking action
Patient/Family Centered Care

Can patients and families easily navigate through our processes?
Shared Decision Making

“the process of interacting with patients who wish to be involved in arriving at an informed, values-based choice among two or more medically reasonable alternatives”

(¹A.M. O’Connor et al, “Modifying Unwarranted Variations In Health Care: Shared Decision Making Using Patient Decision Aids” Health Affairs, October, 2004)
Among those with severe arthritis, no more than 15% were definitely willing to undergo (joint replacement), emphasizing the importance of considering both patients’ preference and surgical indications in evaluating need and appropriateness of rates of surgery.
Interprofessional Care Planning

• A clear and recognizable idea or goal must serve as the focus for team members in order for teamwork to succeed.

• Each member must shift from his/her specific professional focus to one requiring understanding of another’s observations and interpretations.
Interprofessional Care Planning

• A study by Leipzig et al. in 2002 surveyed 2nd year med students, nurse practitioner students and Master’s level social work students.

• Most respondents felt that the interprofessional approach benefited patients and was a productive use of time.
Interprofessional Care Planning

• The majority of the medical residents (80%) believed the physician had the right to change the team’s patient care plans without the consent of the team and had the final word on team decisions.

• 35 – 40% of the nurses and social work students agreed with this viewpoint.
Interprofessional Care Planning

Collaborative practice must foster a status-equal basis between the various team members
Interprofessional Care Planning

A well designed goal should be SMART.
Interprofessional Care Planning

- Specific
- Measurable
- Achievable
- Reliable
- Time-limited
Interprofessional Care Planning

• A team approach to health care decreases on-the-job frustration and increases efficiency.

• It boosts staff satisfaction and retention.

• Collaboration, although vital to how organizations function, is often not part of team members’ performance evaluations.