About the Presenter

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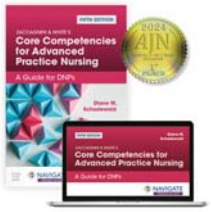

https://go.jblearning.com/schadewald

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Great teams consist of individuals who have learned to trust each other. Over time, they have discovered each other's strengths and weaknesses, enabling them to play as a coordinated whole.

Dr. Amy C. Edmondson
Novartis Professor of Leadership and Management at the Harvard Business School.

www.amycedmondson.com/about

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Objectives

- Define concepts interprofessionalism, collaboration, and collaborative care
- Discuss historical and current professional cultural differences that may contribute to barriers to optimal patient outcomes.
- Recommend methods to resolve interprofessional conflict.
- Develop interprofessional behaviors and policies that promote optimal patient outcomes.

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AACN Competencies for Interprofessional Partnerships

- Communicate in a manner that facilitates a partnership approach to quality care delivery
- Perform effectively in different team roles, using principles and values of team dynamics
- Use knowledge of nursing and other profession to address healthcare needs
- Work with other professions to maintain a climate of mutual learning, respect, and shared values

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Interprofessionalism

Interaction of individuals who represent a particular discipline or branch of knowledge bringing their unique educational backgrounds, experiences, values, roles and identities to the process.

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Collaboration

Collaboration is a process of working one with another. It implies trust and respect not only of each other but also of the work and perspectives each contributes. The concept suggests a bond, a depth of caring for the other and the relationship. It incorporates notions of a synergistic alliance that maximizes the contributions of each participant.

author unknown (1992)

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Collaborative Care

Active participation of each discipline, where all disciplines work together, disciplinary contributions are respected, the patient and caregivers are engaged in the process, and leadership on the team adapts based upon the patient needs.

Robert Wood Johnson Foundation, 2015
www.rwjf.org

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Historical and Current Factors Impacting Interprofessionalism

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Key Issues Contributing to Patient Outcomes Identified by 2001 IOM Report

- Complexity of the knowledge, skills, interventions, and treatments required to deliver care
- Increase in chronic conditions
- Inefficient, disorganized delivery systems
- Challenges to greater implementation of information technology

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Stein, L. I. (1968) The Doctor-Nurse Game, *American Journal of Nursing, 68* (1) pp. 101-105.

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Poll Question #1

Have you experienced the doctor-nurse game?

- Yes, frequently
- Yes, occasionally
- Yes, rarely
- No, never

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Historical Culture of Nurses & Physicians

Nurses

- Handmaiden
- Patient observation/monitoring
- Develop nursing diagnoses
- Follow Doctor's orders
- Responsible for the patient's wellbeing

Physicians

- Omnipotent
- Direct care
- Medical diagnosis of the patient
- Give orders
- Responsible for the patient's survival

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Current Culture of Nurses & Physicians

Nurses

- Colleague/Team member
- Patient observation/monitoring
- Develop nursing diagnoses
- Follow orders but high responsibility to question if orders are appropriate
- Responsible for the patient's wellbeing and survival

Physicians/Advanced Practice Nurses

- Colleague/Team member
- Direct care
- Medical diagnosis of the patient
- Give orders but be open to accept review and/or input about appropriateness of orders
- Responsible for the patient's wellbeing and survival

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Barriers to Development of an Interprofessional Mindset

- Many schools and/or colleges focused on only one health profession
- Separate educational tracks within schools that educate different health professions
- Lack of shared courses
  - Self-sorting of students by profession when enrolled in common courses
- Complexity in harmonizing schedules to support interprofessional experiences

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Methods to Resolve Interprofessional Conflict

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Body language **Communication**

Listening

Interpersonal skill

Clear language

Active Listening

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Measures to Improve Communication

- Maintain eye contact: Convey interest, attentiveness.
- Speak concisely: Avoid jargon.
- Use questions wisely: Clarify or elicit further information.
- Avoid qualifiers or tags (e.g., “sort of,” “kind of,” “I don’t know if you would be interested”): These reduce the effectiveness of one’s message.
- Be aware of gestures, facial expressions, posture: Send positive nonverbal signals (e.g., smiling conveys warmth, leaning forward indicates receptivity, and open-palm gestures suggest accessibility).
- Avoid defensiveness.
- Avoid responding emotionally: Never raise your voice, yell, or cry.

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Conflict Resolution

- Aggression is fueled by perception, intolerance, misunderstanding, and lack of control
- Use of words we, us, and our – care is collaborative not dictated
- Collaborative conflict management (constructive conflict) yields a "larger, shared pool of meaning" of team members and better decisions

(Grenny et al., 2022).

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Factors Contributing to Conflict in the Workplace

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Poll Question #2

Did your educational program include tools for how to address these factors?

- Yes, frequently
- Yes, occasionally
- Yes, rarely
- No, never

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CALMER Approach for Decreasing/Managing Conflict

- **C**atalyst for change
- **A**lter thoughts to change feelings
- **L**isten and then make a diagnosis
- **M**ake an agreement
- **E**ducation and follow-up
- **R**each out and discuss feelings

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PEARLS Techniques - NYU Macy Initiative on Health Communication

- P **Partnership** work together
- E **Empathy** acknowledge frustrations
- A **Apology** verbalize regret
- R **Respect** "I appreciate you…
- L **Legitimization** normalize their feelings
- S **Support** offer commitment

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Forming a Team/Performance & Dynamics

Forming
- Get to know team members
- Begin to develop trust
- Determine team mission
- Determine roles & responsibilities

Storming
- Develop trust
- Face conflict directly
- Learn to listen to group members with tolerance & patience

Norming
- Develop team identity
- Prevent groupthink
- Promote comfort for free expression

Performing
- Set aside individual and professional turf needs
- Develop flexibility for tasks/roles
- Commitment to established tasks & goals

Adjourning
- Evaluate performance & progress
- Measure outcomes
- Celebrate accomplishments

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Developing Interprofessional Behaviors & Policies

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Developing Interprofessional Behaviors

- Collaboration in practice improves when learners have the opportunity to work together in the clinical setting.
- Learning together in the clinical setting or in a simulated experience should also support collaboration.
- The interprofessional learner continuum model (IPLC) illustrates how the learning continuum grows from foundational education to continuing professional development, post-graduation. This model also highlights the enabling and interfering factors and the connection between health system outcomes and learning outcomes.
  - The IPLC (shown on the next slide) was developed through a consensus report from the IOM (IOM, 2015).

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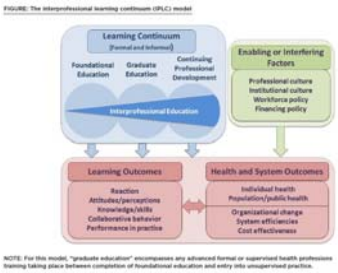
The Interprofessional Learning Continuum (IPLC) Model



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Interprofessional Education Resources

- Healthcare Escape Room Design Guidebooks https://license.umn.edu/product/healthcare-escape-room-design-guidebooks
- Interprofessional Education Collaborative https://www.ipecollaborative.org/
- National Center for Interprofessional Practice and Education https://nexusipe.org/

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Developing Policy to Support Interprofessional Behaviors and Improve Patient Outcomes

- Policy is embedded within the mission and values of organizations and impacted and/or reflected by the resulting culture. Understanding these missions and values are integral to the development of trust in the performance of the interprofessional team.
- It is important to ensure a psychologically safe environment where system changes can be properly addressed (Edmonson, 2019)
- A non-punitive incident reporting system that still includes accountability for error (Just Culture) helps ensure that issues are brought to the forefront so that improvements can be made (The Joint Commission, 2021a; 2021b).
- Root cause analysis to inform policy

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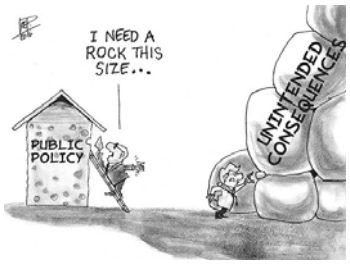
Risks with Policy Change

- Policies are unrealistic
- There are unintended consequences
- We don't assess all the risks



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Factors Influencing Policy

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Develop Policies to Improve/Maintain Quality Outcomes

- Choose a process to analyze current policy
- Be aware of facilitators and barriers to change
- Determine how to measure impact of new policy
- Develop implementation plan for new policy
- Evaluate outcomes of new policy

Bardach & Patashnik (2023)
Define the Problem
Assemble Evidence
Construct the Alternatives
Select the Criteria for Analysis
Project the Outcomes
Confront the Tradeoffs
Stop, Focus, Narrow, Deepen, Decide
Tell Your Story

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Questions

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