

Navigating Interprofessional Care: The Past, Present & Future

Dawn Prentice, RN PhD

Outline

- My Journey to Interprofessional Collaboration (IPC) and Interprofessional Education (IPE)
- Current Issues with IPE and IPC
- The future of IPE and IPC

My Journey



The Importance of 'Team'



Interprofessional Education at Brock



Nursing at Brock



Intensive Care Room

Infant Care



Interprofessional Education Definitions

“Interprofessional education occurs when students from two or more professions learn about, from and with each other to enable effective collaboration and improve health outcomes.”(WHO (2010) Framework for Action on

Interprofessional Education & Collaborative Practice

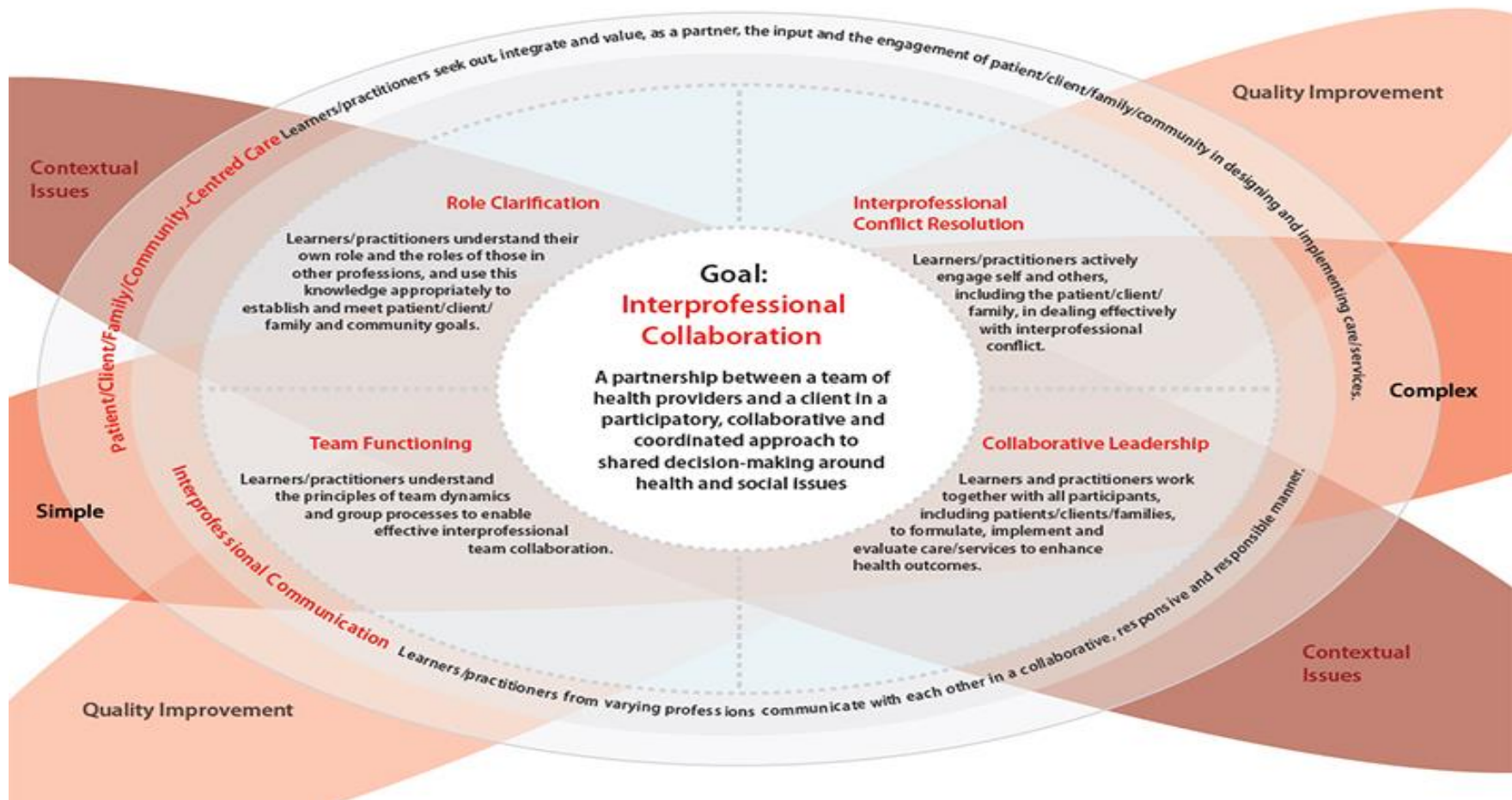
[Http://apps.who.int/iris/bitstream/handle/10665/70185/WHO_HRH_HP_N_10.3_eng.pdf;jsessionid=D4143EB147792E35F17359DD11AEE71F?sequence=1](http://apps.who.int/iris/bitstream/handle/10665/70185/WHO_HRH_HP_N_10.3_eng.pdf;jsessionid=D4143EB147792E35F17359DD11AEE71F?sequence=1)

“Occasions when two or more professions learn with, from and about each other to improve collaboration and the quality of care”

(Centre for Advancement of Interprofessional Education (CAIPE) (2002). Definition of Interprofessional Education (revised).

<http://www.caipe.org.uk>

Interprofessional Competency Framework (2010)



Retrieved from : https://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf

Canadian Interprofessional Competencies (cihc, 2010)

The six competency domains are:

- 1) interprofessional communication
- 2) patient/client/family/community-centered care
- 3) role clarification
- 4) team functioning
- 5) collaborative leadership
- 6) interprofessional conflict resolution

Interprofessional Education and Practice Partners



Brock University



Niagara Health



Niagara College



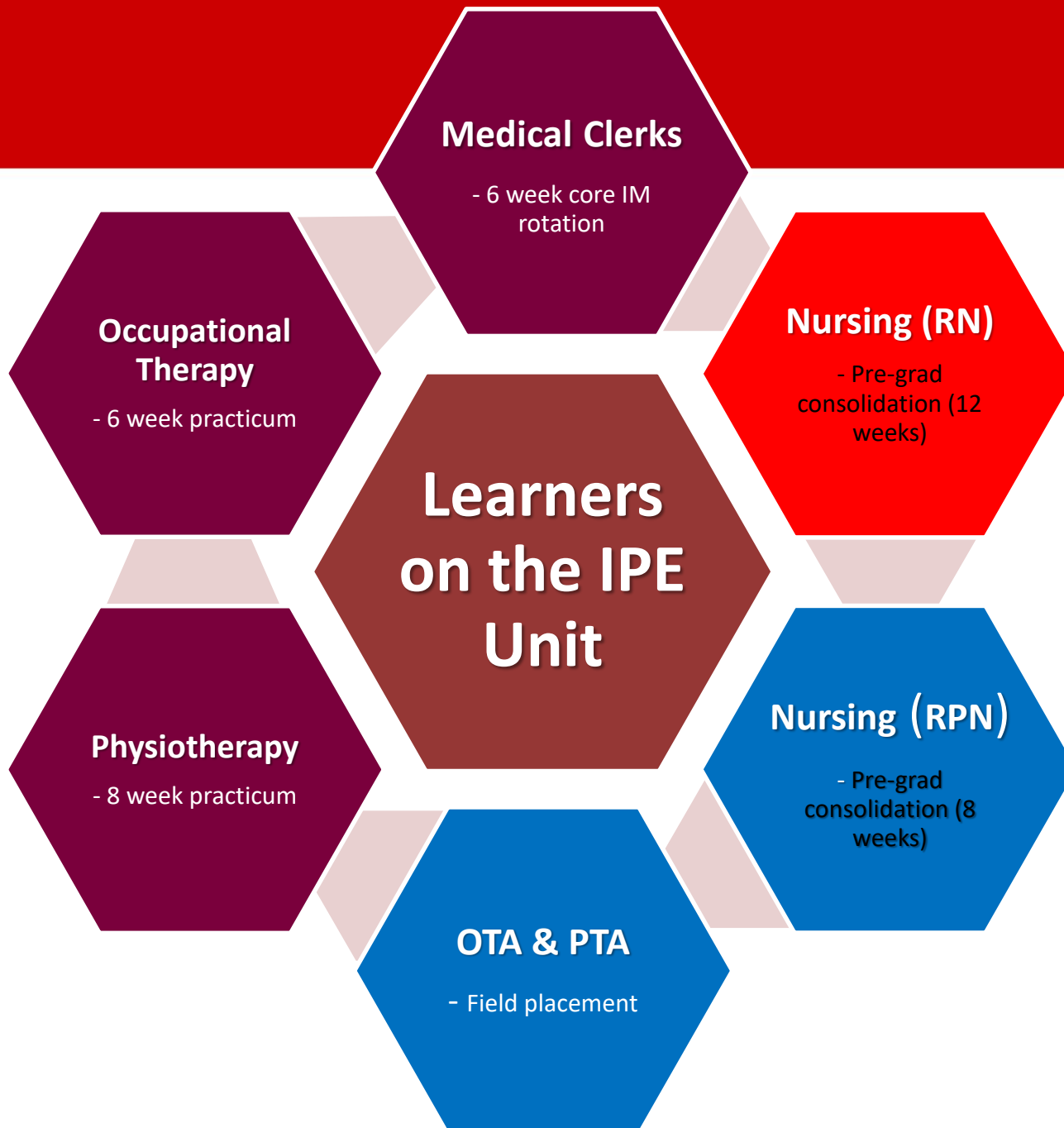
McMaster University – Michael G. DeGroote
School of Medicine (Niagara Regional Campus)

IPE Unit St. Catharine's, Ontario



IPE Event





McMaster

Brock

Niagara
College

Learning Activities

- **Bullet Rounds**
 - Daily, on the unit; all health professionals present to round on patients
- **IPE Rounds**
 - Case discussions focusing on discharge
- **Learner-Led Case Presentation**
 - Students present cases where interprofessional collaboration was strong or poor; discussion
- **Role Presentation**
 - Various professions discuss their scope of practice; barriers to collaboration
- ***Team Observed Structured Clinical Encounter (TOSCE) ©***
 - A simulated team environment to promote learning and assessment of interprofessional, collaborative skills

Team Observed Structured Clinical Encounter (TOSCE)

The McMaster-Ottawa **Team Observed Structured Clinical Encounter (TOSCE)** developed in 2006 through the collaboration between McMaster and Ottawa University

TOSCE stations based on OSCE station reliability and validity guidelines (Harden & Gleason, 1979)

Tool has high degree of acceptability and feasibility, and evidence of inter-rater reliability and internal consistency

(Marshall, Hall & Pippa, 2008; Murray-Davis et al., 2013; Solomon et al., 2011)

What is the TOSCE?

- Stations: Simulated Clinical Setting
 - Team interacts with ‘patient’
 - 1-2 interprofessional evaluators per station
 - Feedback
- Standardized assessment:
 - IPE competencies (based on CIHC framework)
 - Clinical competencies (depends on use of tool)
 - Evaluation method

INSTRUCTIONS FOR PARTICIPANTS

You will have 20 minutes for this TOSCE. During the 20 minutes, you must:

1. Review the information on this BLUE instruction card.
2. Review the information provided to you about Katrina.
3. Discuss as a team, how you might proceed with Katrina.
4. Indicate when the meeting is over and provide a summary plan of care for Katrina.

Katrina is a 38 year old G3P2. She has presented at the ER with minimal spotting and lower abdominal cramping at 22 wks gestation. The obstetrician on call has been notified and is coming to assess. She has been under the care of a midwife for her pregnancy. The obstetrician retrieves her old chart from an ER visit 2 weeks ago. Upon questioning by the obstetrician Katrina reveals that her family physician is unaware of her pregnancy and she has not disclosed to her midwife that she is under the care of a family physician for chronic pain.

Using the skills specific to your discipline and the knowledge of the skills of others on your family health team, please proceed to develop a care plan to meet Katrina's needs.

OBSERVER SCORE SHEET

DEMONSTRATES THE FOLLOWING:									Student 1	Student 2	Student 3	Student 4
Communication Communicates and expresses ideas in an assertive and respectful manner; uses communication strategies in an effective manner with others.												
Collaboration Establishes collaborative relationships with others; promotes the integration of information and perspectives from others; ensures that appropriate information is shared with other providers .												
Roles and Responsibilities Describes one's own roles and responsibilities in a clear manner; describes the roles and responsibilities of other providers; shares best practice knowledge with others; accepts accountability for one's contributions .												
Collaborative Patient-Family Centred Approach Seeks input from patient and family in a respectful manner re: feelings, beliefs, needs and care goals; integrates goals, values, and circumstances into care plans; shares options and health care information with patients and families; advocates for patient and family as partners in decision-making processes												
Conflict Management/Resolution Demonstrates active listening and is respectful of different perspectives and opinions from others; works with others to prevent and deal effectively with conflict .												
Team Functioning Evaluates team function and dynamics; demonstrates shared leadership within the healthcare team that is appropriate to the situation; contributes effectively and meaningfully in interprofessional team discussions .												
1	2	3	4	5	6	7	8	9	Please mark ONLY ONE FULL NUMBER.			
Well below expected		Below expected		Expected	Above expected		Well above expected					

Instructions for Global Rating Scores

Observer

- Please do **not** use individual IPE competency scores from the previous page to determine the Global Score for either the Team or the Individual participant
- Using the scale below, please assign a global rating score for both the Team as a whole and the individual participants.
- This score should reflect your overall assessment of a) how well the team worked together to address the issue presented to them and b) the individual participant's contribution to the team
- **RED FLAG(S):** Please check the box (☐) if an individual's decision/advice (care plan) put the patient at risk.

*The expectation for the team is to demonstrate all or most of the competencies outlined in the descriptions.

Global Scores	Well below expected		Below expected		Expected	Above expected		Well above expected	
	1	2	3	4	5	6	7	8	9
Overall Team Rating									
Participant #1									
Participant #2									
Participant #3									
Participant #4									
Participant #5									

For Red Flags please describe the behaviour/incident: _____

Clinical Evaluation Methods on the IPE Unit

- Team Observed Structured Clinical Encounter (TOSCE)
- Clinical Encounter Cards
- Discipline Specific Clinical Evaluation Tools

Interprofessional Education Unit Evaluation Studies

IPE unit Evaluation Studies

Staff Attitudes' and Perceptions' Study

Assessment of Interprofessional Team Collaboration Scale (AITCS)



Orchard, C. A., King, G. A., Khalili, H., & Bezzina, M. B. (2012). Assessment of Interprofessional Team Collaboration Scale (AITCS): Development and testing of the instrument. *Journal of Continuing Education in the Health Professions*, 32(1), 58–67.
doi:10.1002/chp.21123

IPE Evaluation Study

Participant evaluation of the Team Observed Structured Clinical Encounter (TOSCE) in a clinical teaching unit: A pilot study



Current Study

The Impact of an Interprofessional Education (IPE) Clinical Teaching Unit on Developing Collaborative Skills and Behaviors: A Pilot Case Study



Dr. Jenn Salfi

Benefits of Interprofessional Collaboration

- Co-ordinated patient care
- Patient satisfaction
- Team members work together
 - Improved communication between disciplines
 - All healthcare workers are comfortable speaking to each other
 - Decreased hierarchy in the hospital environment
- Patient safety outcomes
 - Decreased adverse events
- Increased staff morale
 - Increased recruitment and retention

Benefits of Interprofessional Education

- Learning early- pre-qualification
- Students are ready for collaborative practice upon graduation
- Start the “culture shift early”



Barriers to Interprofessional Collaboration

- Individual level
 - Respecting each team member's role and knowledge
 - Scope of practice
 - Individual commitment of time and resources
 - Valuing interprofessional collaborative practice



Barriers to Interprofessional Education

- Educational Institutions
 - Leadership
 - Lack of commitment from all schools
 - Do not prioritize IPE in curriculum
 - Lack of faculty expertise with IPE and IPC

The Future of Interprofessional Collaboration

Key Issues:

- Sustainability
- Organizational Support (Academic and Hospitals)
- Addressing Curriculum issues
- Addressing different levels of learners

Strategies:

- Funding
- Providing environments conducive to IPC
- Educators will need to work together to ensure time and resources are built into interprofessional collaboration

Moving Forward: Research Priorities

- Many tools have been developed to assess interprofessional collaboration
- Need more robust outcome studies



Navigating the Future of IPC



Thank You!