

# POSITION STATEMENT on INTERPROFESSIONAL COLLABORATIVE PRACTICE

*The Health Professions Regulatory Network was established in 2006 as a forum for all the health professions' regulatory bodies in Nova Scotia to discuss and address common regulatory issues. The Department of Health is also a member of this network, and legislative recommendations may be among the outcomes of this group's discussions.*

- ~ Health Professions Regulatory Network
- ~ College of Dental Hygienists of Nova Scotia
- ~ College of Licensed Practical Nurses of Nova Scotia
- ~ College of Occupational Therapists of Nova Scotia
- ~ College of Physicians and Surgeons of Nova Scotia
- ~ College of Registered Nurses of Nova Scotia
- ~ Nova Scotia Board of Examiners in Psychology
- ~ Nova Scotia College of Chiropractors
- ~ Nova Scotia College of Medical Laboratory Technologists
- ~ Nova Scotia College of Pharmacists
- ~ Nova Scotia College of Physiotherapists
- ~ Nova Scotia College of Respiratory Therapists
- ~ Nova Scotia Department of Health
- ~ Nova Scotia Dietetic Association
- ~ Provincial Dental Board of Nova Scotia

The Health Professions Regulatory Network believes that, regardless of the setting, interprofessional collaboration will increase public access to health care and lead to the best health outcomes for individuals and their families. This network also believes that health professionals working to their full scope of practice will further enhance access and health outcomes.

Changes resulting from healthcare restructuring over the past 15 years, combined with a move towards more community-based health care, have led to today's increasingly complex healthcare environments. There are now also higher public demands on the healthcare system and higher expectations of health professionals; all of which have been influenced by advances in technology, more complex health issues, increased client acuity levels in all healthcare settings, and more informed health consumers.

In addition, it has been predicted that as Canada's population continues to age demands for health care will rise even further. Conversely, fewer health professionals will be available to provide the required health services because of the nation's low birth rate.

To address these challenges, new models of care will have to be implemented in all healthcare settings. Healthcare professionals will also need to work together more effectively and efficiently if they are to continue to achieve the best health outcomes for their clients (Enhancing Interdisciplinary Collaboration in Primary Health Care Initiative, EICP, 2006).

According to Romanow (2002), a comprehensive, coordinated health system responds to the health status of clients and leads to integrated continuous health services. Improving population health by addressing the broad determinants of health has made a substantial change in the delivery of health care: shifting the focus from a model of disease management and cure to one based on illness and injury prevention, health promotion and chronic disease management. However, creating a system based on this manner of delivering health care will require the diverse, coordinated and integrated services of a broad range of health professionals working in an interprofessional collaborative model.

Transforming the traditional approach of health care to one based on interprofessional collaborative practice will require not only the will of health professionals and healthcare organizations, but also a cultural shift in all practice settings and the support of regulatory bodies and educational institutions (Orchard, Curran, & Kabene, 2005). The main challenge in enabling the successful implementation of a sustainable interprofessional collaborative practice model will be to facilitate the required cultural shift. The Health Professions Regulatory Network believes that regulatory bodies have a responsibility and must commit to assist in the achievement of this challenge.

## **PRINCIPLES OF INTERPROFESSIONAL COLLABORATIVE PRACTICE**

Interprofessional collaborative practice is centered on the needs of clients; enabling them to be partners in their care, with the most appropriate health professionals providing the services required to meet their healthcare needs (Health Canada, 2005).

Interprofessional collaborative practice recognizes and values the expertise, as well as the separate and shared knowledge and skills, of all health professionals, and leads to a participatory, collaborative and coordinated approach to client care.

Interprofessional collaborative practice:

- is guided by shared values, a common purpose or care outcome, mutual respect, and effective communications optimizes participation in clinical decision-making within and across professions
- evolves over time, requiring the flexibility to add or subtract health team members based on the needs of individual clients
- must be supported through policy, protocols and procedures at all levels of decision making, including government, professional associations, regulatory bodies and healthcare organizations (Multidisciplinary Collaborative Primary Maternity Care Project, 2006; Orchard, Curran, Kabene, 2005; EICP, 2005, 2006).

The following principles have been adapted from those developed for the Enhancing Interdisciplinary Collaboration in Health Care for Health Canada's Primary Health Care Initiative (2006) to relate to all health settings:

### **Focus on and engagement of clients**

Focussing on and engaging clients as integral members of the healthcare team is paramount in interprofessional collaborative practice and the provision of continuous

integrated health services. When clients are actively engaged in managing their own health, they become part of the decision-making team, rather than passive recipients of health care. Respecting and supporting clients' diversity and informed decisions and choices are inherent in client engagement.

Regardless of the practice setting, the first step in building an interprofessional team is to identify the health needs of a specific client population. Decisions can then be made regarding how the separate and shared knowledge and skills of each health professional can best influence and enhance client care.

### **Population health**

Using a population health approach is also paramount to the success of interprofessional collaborative practice. This approach, which uses the determinants of health to address individual client needs, relies heavily on client engagement ... with clients and health professionals working together to determine what clients should do to effectively promote their health and/or manage their illnesses.

### **Best practices/evidence-based health care and services**

Systems and supports for ongoing evaluation of health outcomes must be an essential component of any interprofessional collaborative practice; enabling health professionals to direct the majority of their energy to direct client care. Regularly discussing relevant evidence will also help interprofessional team members understand each other's perspectives and change their practice based on the best evidence.

In addition, evaluating health outcomes (using best practices) and building evidence to direct health services will help shift the focus from 'illness' to 'health' care.

### **Trust and respect**

To promote effective, integrated interprofessional collaborative practice, health team members must have a basic understanding of and respect for each other's roles as accountable and autonomous health professionals, as well as their separate and shared scopes of practice. Health team members also need to trust that all team members will consult and collaborate appropriately when clients' needs are beyond their scope of practice.

Listening, being open to all points of view, and focussing on client needs are also important components of building solid relationships among and between health professionals, especially when a new role or member is introduced to a well functioning team. Mutual trust and respect will

develop over time with the experience of working as part of an interprofessional team.

### **Effective communications**

Effective communications is another essential component of interprofessional collaborative practice because it is central to a common philosophy of care and knowledge exchange. Effective communications will require each member of the interprofessional team to commit to the investment of a significant amount of time to become skilled in active listening and conflict resolution. In today's healthcare environment, technology can be an enabler of effective formal communications.

## **OUTCOMES ASSOCIATED WITH INTERPROFESSIONAL COLLABORATION**

Although little research has been conducted on outcomes associated with true interprofessional collaborative practice teams, there has been research on outcomes of collaborative practice between specific groups of professionals.

For instance, Barrere and Ellis (2002) found that regardless of the severity of a patient's condition, collaboration was an integral factor in positive patient outcomes. Evidence of the outcomes of nurse-physician collaboration has been compiled by O'Brien-Pallas, Hiroz, Cook & Mildner (2005). Improved patient outcomes have also been demonstrated in studies of collaboration between pharmacists and physicians, and when pharmacists are included as part of the healthcare team in both primary healthcare and hospital settings (Weschules et al, 2006).

Recent reports on health human resources have also recommended interprofessional collaborative practice as an effective way to reduce stress and burnout among healthcare professionals, as well as to improve the quality of care and enhance patient safety (Oandasan et al., 2006).

Based on the literature, outcomes associated with collaborative practice can be identified for various groups, including:

#### **Clients**

- improved patient satisfaction
- improved patient transfer and discharge decisions
- improved patient care and outcomes
- decreased risk-adjusted length of stay for patients
- reduced medication errors

#### **Health Professionals**

- improved job satisfaction
- decreased job associated stress
- lower nurse turnover rates
- improved communication among caregivers
- improved efficiency
- improved understanding of roles

#### **Healthcare Organizations**

- decreased costs
- improved efficiency of healthcare providers

Although the majority of research related to these outcomes has focused on the collaboration of nurses, pharmacists and physicians, it is likely that client care, health professional job satisfaction and improved efficiency would be further enhanced with an interprofessional collaborative practice model of care involving all professional groups.

## **RESPONSIBILITIES**

In an interprofessional collaborative practice model, individual and collective responsibilities include the following:

#### **Individual Professionals**

Health professionals must practise to their full scope and understand and demonstrate respect for the unique and shared competencies of other healthcare team members. All members of a team must have a clear understanding of their own role and expertise, be confident in their own abilities, recognize the boundaries of their scope of practice, be committed to the values and ethics of their own profession, and be knowledgeable of their own practice standards (Orchard, Curran, & Kabene, 2005). Practitioners must also be accountable for and committed to maintaining effective communications with other members of the interprofessional healthcare team, and promote team problem-solving, decision-making and collaboration by applying principles of group dynamics and conflict resolution.

#### **Employers/Healthcare Organizations**

Employers and healthcare organizations must commit to a vision that will enable the culture shift required for interprofessional collaborative practice. They, along with administrative and clinical leaders, must also ensure the availability of required resources and infrastructures to facilitate staff training and development, effective and ongoing communications, and the development of relevant policies and guidelines. Performance management measures must be identified and processes for ongoing evaluation/feedback must be developed and implemented for all health professionals (EICP, 2006).

### **Professional Associations/Regulatory Bodies**

Professional associations and regulatory bodies must demonstrate leadership and ensure that legislation has the flexibility to support interprofessional collaborative practice. Regulatory bodies need to work together to develop joint competencies and standards, and add principles of interprofessional collaborative practice to their respective approval standards for educational programs. Regulators must also develop common expectations for interprofessional practice and ensure mechanisms are in place to support ongoing competence of individual professionals.

### **Accreditation Organizations**

Accreditation organizations need to take the responsibility to develop and integrate performance indicators of interprofessional collaborative practice into accreditation requirements. While measuring a healthcare organization's movement toward interprofessional collaborative (client centered) practice would certainly be one of the purposes of these performance indicators, they should also serve as an incentive for health organizations to adopt the philosophy of interprofessional collaborative practice.

### **Educational Institutions**

Educational institutions must provide the beginning values, skills and professional role socialization necessary for interprofessional collaborative practice. New education models that foster interprofessional values and skills within the professional education model must be implemented and evaluated. Methods to enhance educational and clinical opportunities for joint learning of the health professions must also be developed and implemented (Oandasun et al., 2004).

### **Governments**

Governments must develop and communicate a vision for interprofessional collaborative practice as well as provide mechanisms and structures to support interprofessional collaborative practice including effective funding mechanisms (Hartnell et al., 2005). Remuneration to enable all health professionals to engage in and support interprofessional collaborative practice must be explored and implemented (EICP, 2006).

### **Researchers**

Although some research has measured outcomes of interprofessional collaborative practice, research focussing on the measurement of interprofessional collaborative practice on client outcomes, health professional outcomes and organizational outcomes is needed. Evidence is also needed on the best strategies to educate students in the health professions, not only in relation to their socialization

but also their interest to practise collaboratively when they graduate. And studies need to be conducted to determine interventions to best improve interprofessional collaborative practice in traditional healthcare settings.

## **CONCLUSION**

Advances in technology, increasingly complex health issues, rising patient acuity levels, savvy health consumers, an aging population, and a declining number of health professionals. These are but a few of the reasons why healthcare professionals will need to work together more effectively and efficiently if they are to continue to achieve the best health outcomes for their clients ... and why all those concerned about the future health of Nova Scotians and the delivery of quality health services need to devise a new model of care, incorporating interprofessional collaborative practice.

Interprofessional collaborative practice is centered on the needs of clients; enabling them to be partners in their care, with the most appropriate health professional providing the services required to meet their healthcare needs. It will also promote a more coordinated approach to client care.

Although little research has been conducted on outcomes associated with true interprofessional collaborative practice teams. For instance, studies have shown that collaboration is an effective way to improve the quality of care, enhance patient safety, increase job satisfaction, and reduce stress and burnout among healthcare professionals.

Leadership and commitment are needed at all levels of the healthcare system, including regulatory bodies, to implement, sustain and measure outcomes of interprofessional collaborative practice over the long term.

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