Welcome!

PREPARED BY: GAYLE ADAMS-CARPINO, PHD, RSW, MSW, FACULTY, NORTHERN ONTARIO SCHOOL OF MEDICINE

Land Acknowledgement

Located on the Robinson-Huron Treaty of 1850 territory, NOSM recognizes that we are on the traditional lands of the Atikameksheng Anishnawbek and Wahnapitae First Nations

Disclosure Slide

▶ **Speaker:**

- ▶ no disclosures or no financial relationships to disclose

Learning Objectives

At the end of this presentation, participants will be able to:

1. Recognize the importance of effective and conscientious communication

2. Establish strategies for maintaining successful collaborative relationships

3. Identify challenges that might occur in rural settings when not all traditional team members are present

I will also be sharing my research on student and community insights on IPE

Wealth of knowledge and experience in our virtual workshop

Sharing and Learning together

With thanks to my students

Sara: Social Work, 3rd year

Lauren: 4th year Health Promotion

Christina: Health Promotion

Getting to know each other

- In the CHAT could you type in your favourite song?

- Word Cloud: could you write 1-2 words about the theme, meaning, emotion of the song?

Introductions…who is in the workshop? Word Cloud

A little about me and my role at the Northern Ontario School of Medicine (NOSM)

► Registered social worker informs my social justice approach to teaching at the NOSM

► Our disciplinary training underscores the lens by which we understand a health or social care issue influences how we respond, advocate for health services (role and scope of social work)

► Our personal and professional values and beliefs can influence how we interact and communicate with those around us…
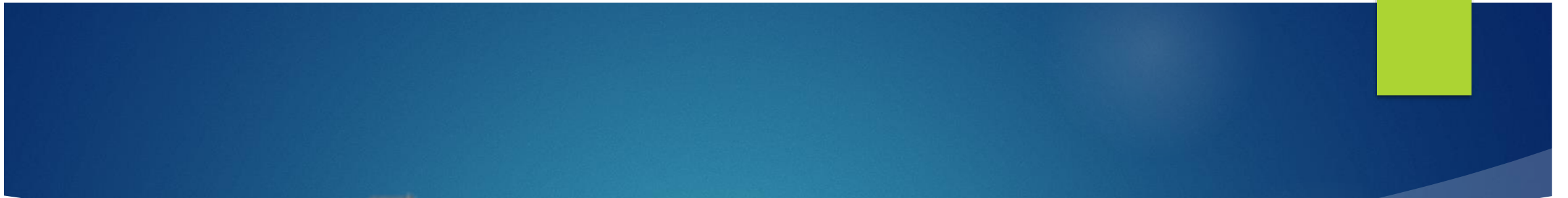
My Role at NOSM: Teaching: Interprofessional Education (IPE) for Interprofessional Collaboration

► IPE is an **interactive** educational approach in which learners from two or more different occupations learn with, from and about each other **to improve collaboration, and the quality of care and services** (CAIPE, 2018)

IPE is a conduit for Interprofessional Collaboration (IPC)

► "Is a *partnership* between a team of health providers and a client in a participatory, *collaborative* and coordinated approach to shared decision-making around health and social issues"
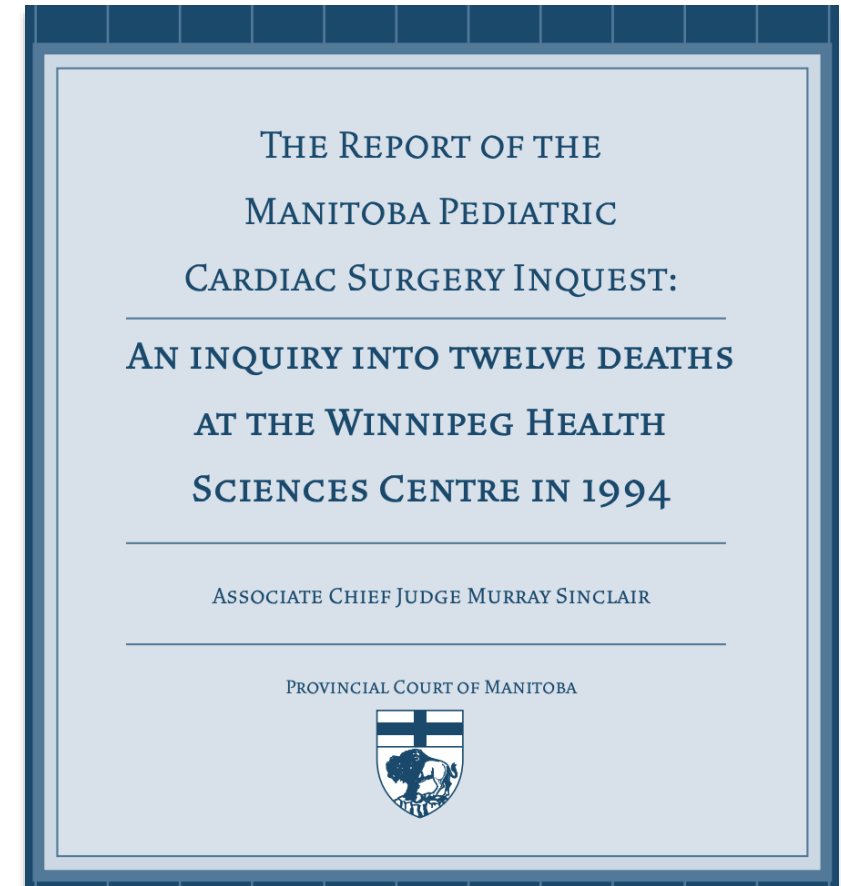
► (CIHC, 2009)

Health workers: the human faces of the health system (Frenk et al., 2010)

▶ "Leadership, teamwork, communication and decision-making are recurring themes in this Report. They are not side issues, not matters of mere personality difference, but central issues. Where these issues were not resolved, they often led to tragic results"(Sinclair, 2001)

THE REPORT OF THE

MANITOBA PEDIATRIC

CARDIAC SURGERY INQUEST:

AN INQUIRY INTO TWELVE DEATHS

AT THE WINNIPEG HEALTH

SCIENCES CENTRE IN 1994

ASSOCIATE CHIEF JUDGE MURRAY SINCLAIR

PROVINCIAL COURT OF MANITOBA

Chief Judge Murray Sinclair

"We can seek out and identify the one who committed the error and hold him or her or the institution as the 'culprit' or we can analyze the error to learn from it, improve things so as to reduce the probability that the error will not be made again" (Chief Judge Sinclair, Chapter 10, p. 26)

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Collaboration: 6 competency domains

- Role Clarification
- Communication
- Conflict Management
- Team Functioning
- Patient/Client/Family/Community Centred Care
- Collaborative Leadership

Collaborative Leadership in the National Interprofessional Competency Framework

Learners/practitioners seek out, integrate and value as a partner, the input and the engagement of the patient/client/family/community in designing...

Community-Centred Care · Contextual Issues · Quality Improvement

Role Clarification

Learners/practitioners understand their own role and the roles of those in other professions, and use this knowledge appropriately to establish and meet patient/client/family and community goals

Interprofessional Conflict Resolution

Learners/practitioners actively engage self and others, including the patient/client/family, in dealing effectively with interprofessional conflict

Goal:
Interprofessional Collaboration
A partnership between a team of health providers and a client in a participatory, collaborative and coordinated approach to shared decision-making around health and social issues

Team Functioning

Learners/practitioners understand the principles of team dynamics and group processes to enable effective interprofessional team collaboration

Collaborative Leadership

Learners and practitioners work together with all participants, including patients/clients/families, to formulate, implement and evaluate care/services to enhance health outcomes

Interprofessional Communication Learners/practitioners from varying professions communicate with each other in a collaborative, responsive and responsible manner

Quality Improvement · Contextual Issues

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Relevance of Interprofessional Collaboration

- ► Improved Patient Safety-US Joint Commission on Accreditation of Health Care Organizations

- ► Improved Patient Outcomes in specific populations (Zwarenstein et al., 2009)

- ► Improved cost efficiency (D'Amour, 2005)

- ► Improved Health Professional Satisfaction (Cohen et al., 2016)

- ➢ Leads to a Healthy Workplace (Shamian & El-Jaradali, 2007)

-different skills coming together

-different puzzle pieces represent more comprehensive and holistic care

-many moving parts, adaptations along the way

-see if what you are doing is working and make adjustments as needed

- Case Study: of Helene Campbell and her experience with lung transplantation and *advocacy* for organ transplantation

- Use of social media and celebrity to raise awareness

Collaboration: In the Words of 2nd year medical students and 3rd year nursing students 2021

Collaboration can be affected by:

- ► Personalities
- ► Backgrounds
- ► Environment (i.e., rural, urban setting)
- ► Professional roles
- ► Stereotypes
- ► Power and hierarchy
- ► Precipitating factors

Background: A lot of expectations for IPE and collaborative practice

► The definition of IPE does not consider the complex, contextual manner of this form of learning for collaborative teamwork (Charles et al., 2008)

► There may be an inherent logic supporting the need for collaborative teamwork, but there may be barriers within the nature of healthcare disciplines (McNeil et al., 2013)

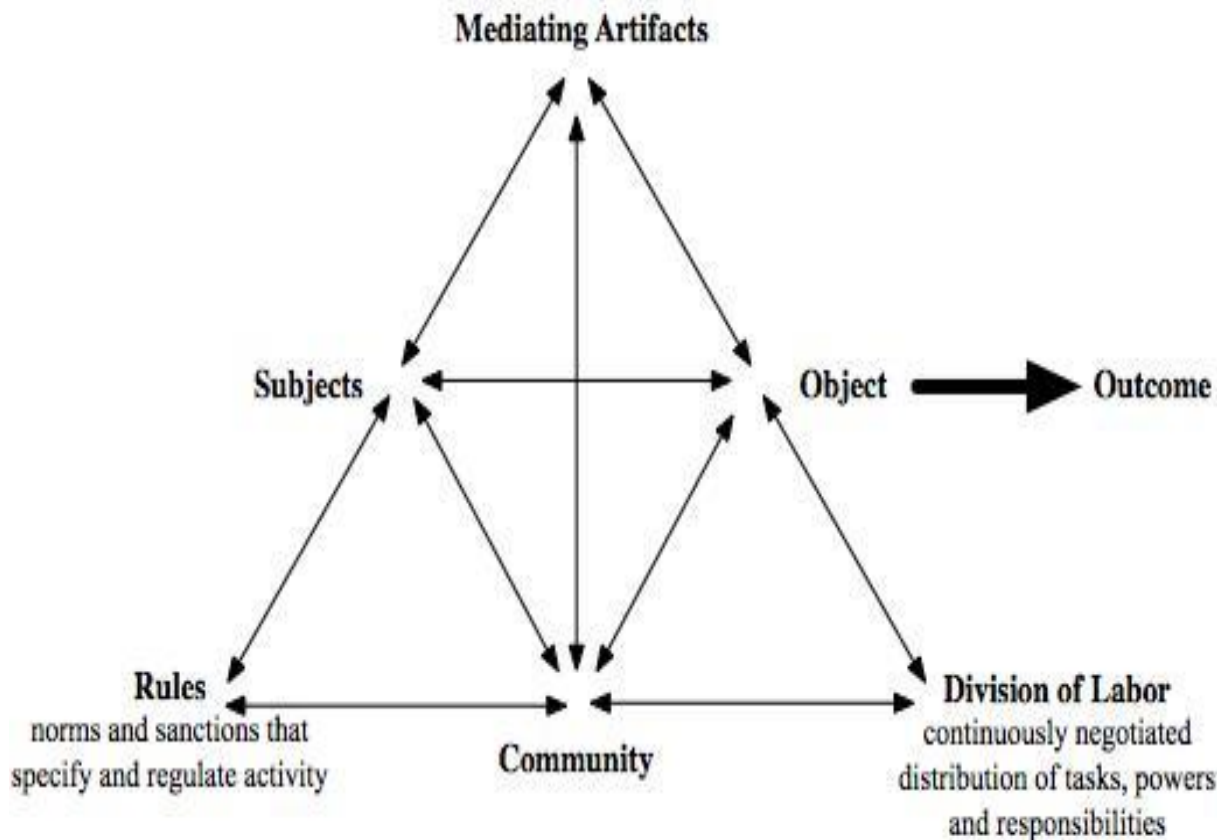# We are influenced by many factors in our lives including how we collaborate…

Effective Collaboration

- Cooperation
- Assertiveness
- Responsibility
- Communication
- Autonomy
- Coordination
- Trust

Background to my IPE research: What Students are Saying About IPE for Collaborative Practice

- This mixed-methods study, integrating principles of action research, was conducted within the context of an IPE program involving 67 participants from two cohorts, 2019 and 2020
- **N=23 interviews**
- 21 with students
- 2 with community partners

- 44 out of 51 participants (86%) completed survey
- **Fields of Education:**
- *Health* (nursing, social work, occupational therapy, health promotion, developmental service worker)
- *Science* (kinesiology, radiation therapy, pharmacy, biology, engineering)
- *Business*

Cultural Historical Activity Theory: Understanding Roles and teamwork

Mediating Artifacts

Subjects ⟷ **Object** ⟶ **Outcome**

Rules
norms and sanctions that
specify and regulate activity

Community

Division of Labor
continuously negotiated
distribution of tasks, powers
and responsibilities

- ▶ Provides structure for analysis to provide an explanation of how students experience IPE

- ▶ Illuminates contextual issues where all activities influence each other

- ▶ Understanding experiences through interactions with others in consideration of the social context

- ▶ Utility: diversity of knowledge and experiences

Collaboration: 6 competency domains

- ► *Role Clarification*
- ► Communication
- ► Conflict Management
- ► Team Functioning
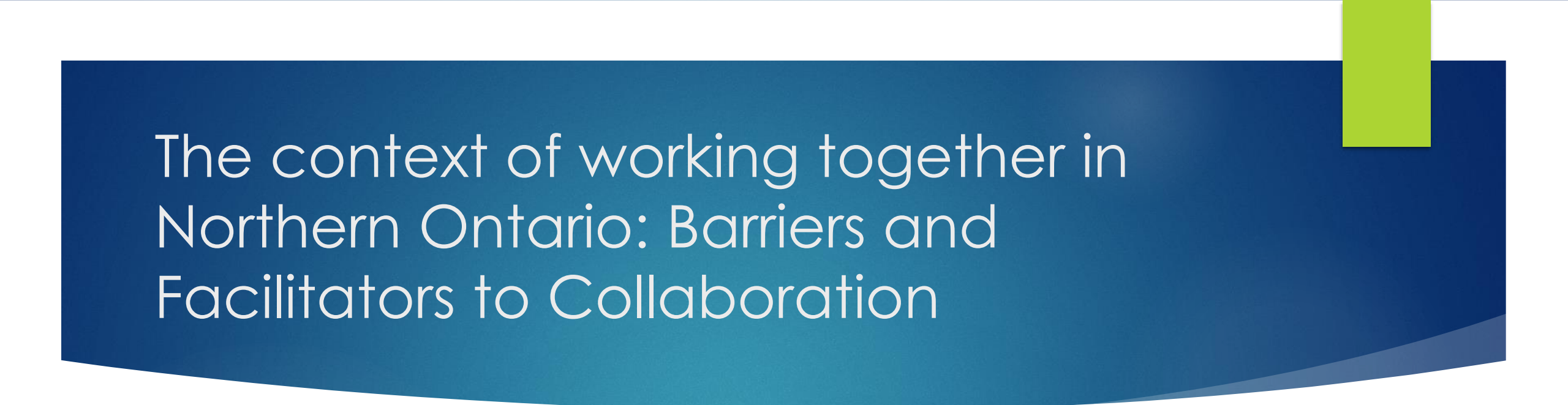- ► Patient/Client/Family/Community Centred Care
- ► Collaborative Leadership

Collaborative Leadership in the National Interprofessional Competency Framework

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Quality Improvement

Contextual Issues

Student Reflections on the Framework

- Models help, leaves a **framework** to fall back on when you don't know what to do, without a concrete path… the **models** are an algorithm…role clarification and communication so key because each provider has its own jargon, hard to work on same goal with fear of insulting them (may be using jargon (Undergraduate Medicine, Year 3)

Interprofessional Expectations Re: Role Clarification

- Explores own professional ethical considerations, role and scope of practice

- Explores team members roles and scopes of practice

- Identifies relevant professional roles in a given context, and identifies potential gaps in team membership…how does context influence your work?

- Explores professional role overlap; how are we all related? Unique?

- Explores patient's role as an IP team member

The context of working together in Northern Ontario: Barriers and Facilitators to Collaboration

Different disciplines, regulated and non-regulated health professionals, including the family and patient

Scopes of practice, Regulatory Bodies-how they influence collaboration

Northern Ontario, teams that form together as needed, teams that have worked together for long time periods, goal: collaborative patient centred care

Role Clarification

Why Does it Matter?

Enhances utilization of skills

Empowerment of team members

Improved communication

Enhanced relationships

"Role blurring" management

Necessary for effective collaboration
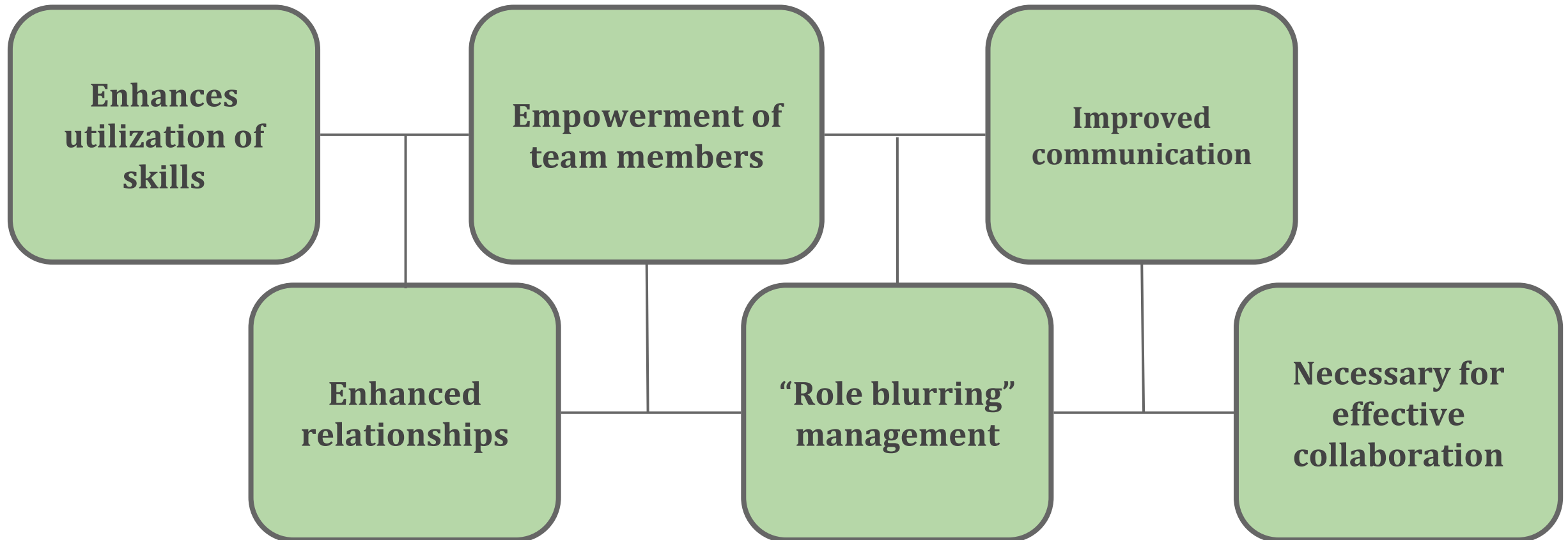
Disciplinary Knowledge Legitimacy and Autonomy through Certification and and licensing

- Each discipline has its own assumptions, epistemology, concepts and theories

- Epistemology 'understanding what it means to know'

- This all influences interprofessional collaboration
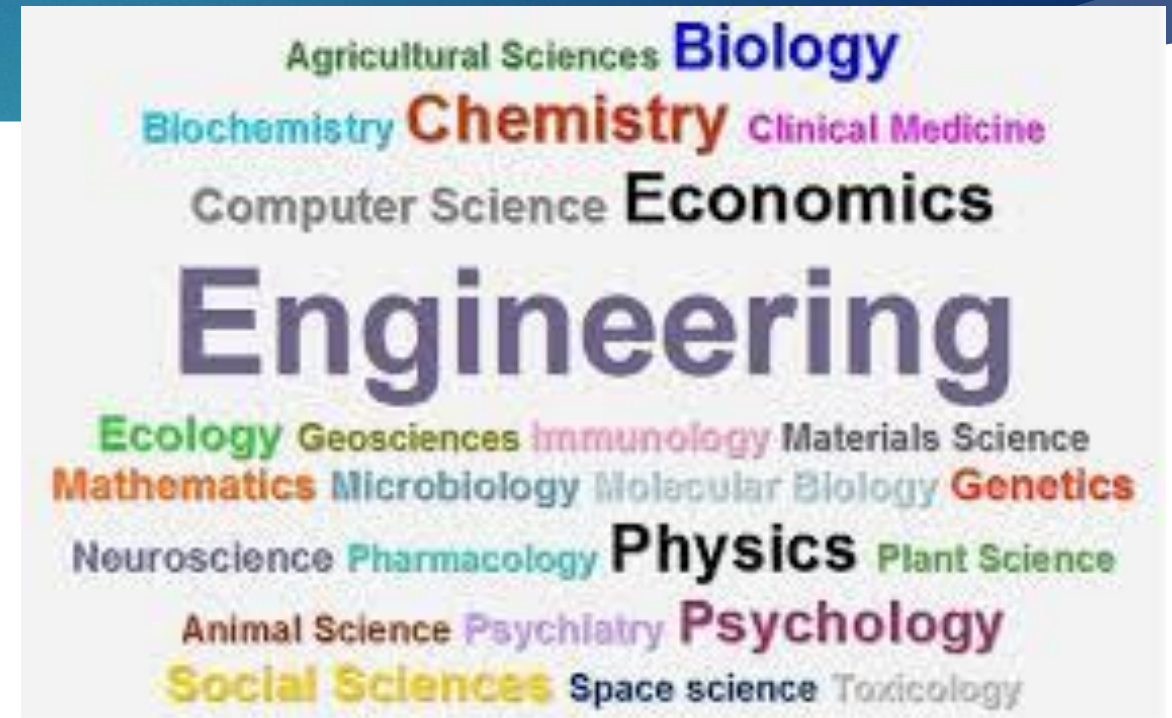
Results of my study n=44

Roles and Responsibilities

9. Identify and describe my abilities and contributions to the IP team	5	6	<.0001*
10. Be accountable for my contributions to the IP team	6	6.5	.0002*
11. Understand the abilities and contributions of IP team members	5	6	<.0001*
12. Recognize how others' skills and knowledge complement and overlap with my own	5	7	<.0001*

Lack of Role clarification: one of the main obstacles to Interprofessional collaboration

► Lack of respect and understanding of another's full scope of practice

► Inhibits willingness to collaborate

► What is the role of non-regulated health care providers and family members? How do we ensure all individuals are being utilized to their full capacity

► My experience at College Boreal and Funeral Home Director Program

Reflections from a student

- …using this model to **get over intimidation**…**impact of being vulnerable**, as a medical student very intimidating to ask…the **framework** makes it **legitimate** to ask questions, makes it comfortable to ask questions…IPE not formalized, therefore these models are not available to most students" (Undergraduate Medicine)

Small Group Activity: 15 minutes

- Write down what your thoughts are about the different professional roles in the group.
- Example, what is the role of the social worker, paramedic?

- Let's review and explore some of our assumptions/understanding of another's role and correct those that may need to be amended

- What did you learn about the role of group members?

- Did you feel your role was understood?

- How can you use this activity to help teams understand each other's role in your workplace setting?

Collaboration: 6 competency domains

▶ Role Clarification

▶ *Communication*

▶ Conflict Management

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Community-Centred Care

Contextual Issues

Quality Improvement

Quality Improvement

Contextual Issues

Communication: with the added challenge of Virtual communication!

Nonverbal Communication

Eye contact

Facial expressions

Body posture

Seating
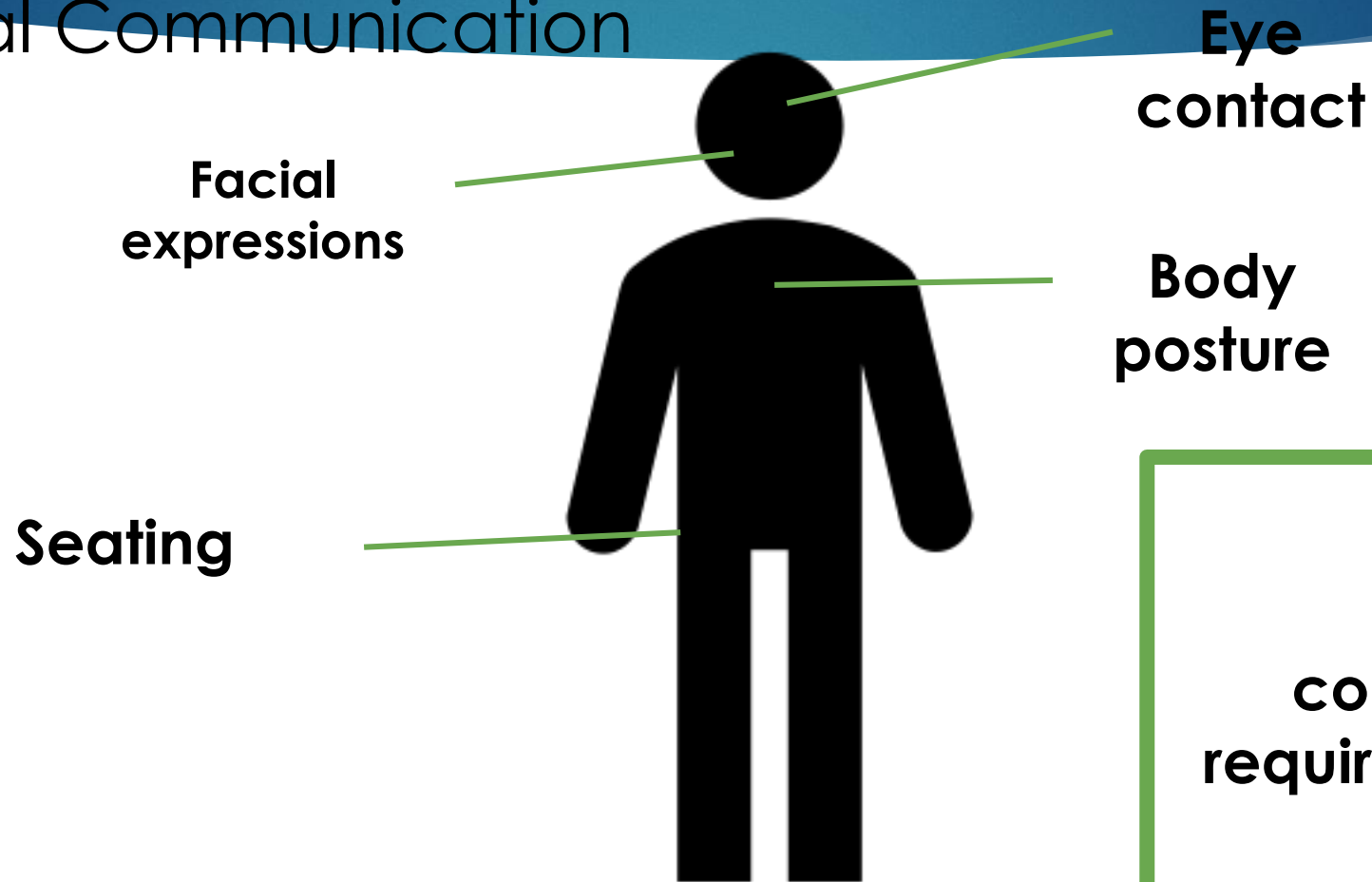
Nonverbal communication requires interpretation

Communication

- Takes up to 75% of our day

- Is interpersonal

- Contributes to social connection

- Influenced by political, cultural and organizational contexts

- Is dependent on the quality of interpersonal relationships

- Involves understanding other's perspectives

- MacLennan, J. (2008). Interpersonal Communications for Canadians. An Interdisciplinary Approach. Oxford University Press: Don Mills, ON

Communication			
1. Promote effective communication among members of an interprofessional (IP) team	5	7	<.0001*
2. Actively listen to IP team members' ideas and concerns	6	7	<.0001*
3. Express my ideas and concerns without being judgmental	5	6	.0003*
4. Provide constructive feedback to IP team members	5	6	.0002*
5. Express my ideas and concerns in a clear, concise manner	5	6	.0003*

Communication results from IPE program

Communication Considerations

Health literacy

Professional hierarchies – impact on clients/patients but also among your team

Professionalism in delivery of information

Responsibility on team members to speak up

Giving and receiving feedback when interprofessional communication is not successful

Reflections from a medical student

"When I was in medical school I spent hundreds of hours looking into a microscope- a skill I never needed to know or ever use. Yet, I didn't have a single class that taught me communication and teamwork skills- something I need every day I walk into the hospital"

(Prnovost & Vohr, 2010, p.46 – Taken from Core Competencies for Interprofessional Collaborative Practice, 2011)

Communication and Interprofessional Education and my research

- "IPE helped me realize that if I can't communicate with others, we may compromise the health of the client; this has motivated me to share my concerns with colleagues…confidence and motivation to keep remembering the client is at the centre of the care". (Undergraduate Health)

- Growing body of evidence demonstrating adverse effects for patients when there is poor communication between health care professionals (Zwarenstein et al., 2013)

Things to consider

► How were you trained to communicate with other disciplines? Word Cloud

► What were you taught about collaboration? Word Cloud

► How does this impact the way you communicate with those you work with?

Collaboration: 6 competency domains

▶ Role Clarification

▶ Communication

▶ Conflict Management

▶ Team Functioning

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▶ Collaborative Leadership

Collaborative Leadership in the National Interprofessional Competency Framework

Theme 5: Utilizing collective knowledge to advance teamwork

► "The patient needs a dynamic team that changes constantly, that is why we need to learn how to work together…and do what is necessary for what the patient and what the community needs"
(Gerry, Graduate Health)

Subtheme: Patient/Client/Family/Community Centred Care

This theme pertains to health human resource shortages in Northern Ontario which requires a healthcare team to have the skills, knowledge and attitude to effectively communicate with each other, but also with community to support meaningful referrals to the right community resources. The knowledge of the patient/client as the centre of the team is essential to support patient care that is accessible.

Team Functioning

Indicators:

- Adapts behaviours to fit with team's stage of development
- Identifies opportunities to improve team outcomes
- Integrates evidence and reflection to inform professional and team practice
- Takes action based on reflection to improve professional and team performance

Four stages of Team Development Tuckman, 1965

FORMING

During the first stage, **forming**, team members establish interpersonal relationships, become familiar with the assigned task (the group assignment) and create ground rules.

STORMING

The second stage, **storming,** marks a time of intragroup conflict due to lack of group unity. Because team members still see themselves as individuals rather than as part of a team, they may resist the formation of group structure in favour of expressing their individuality.

NORMING

The third stage, **norming,** is characterized by the emergence of group harmony as group members begin to openly express ideas and opinions. Members begin to accept teammates for who they are and task-related conflicts are avoided in an effort to preserve harmony.

PERFORMING

The final stage, **performing,** reflects a period of productive collaboration in which members demonstrate support for each other and assume roles that will enhance task activities. Constructive attempts are made to resolve an issues related to the completion of the task.

Four Stages of Team Development

Building a strong interprofessional team: From the Students

How can health care providers improve their care and skills to improve their interaction with patients

- addressing pts needs, empathy
- Limit power-dynamic between physician and patient
- Building strong healthcare team and knowing when other HCPs can cover what role, make the most of the team
- Importance of team in smaller communities
- Organizational issues – culture, racism and their impact on pt care

Art of what we do. Science of what we do.

- Art – patient interactions, empathic patients
- Science – anatomy, physiology, etc.

Working Collaboratively:

High performance in teams require: BALANCE

Task what is done and the problems associated with completion

Process how the team functions what happens between the members, the way decisions are made

Process affects Outcome

Activity: Exploring your Personality

▶ When completed: scroll down to the image in the Speaking the Language of Personality section to identify the colour related to your results.

▶ https://personalitylingo.com/free-personality-test/

▶ Please type into the chat your colour **Word Cloud**

▶ Is there a particular dominant colour in the group?

▶ Is there a good distribution of colours?

Spectrum of Colours influences our approaches to groups/teams

Movers

Leadership Style
- Expects quick action
- Performance oriented

Stressors
- Lack of freedom- close supervision
- Theoretical discussions
- Repetition & routine

Givers

Leadership Style
- Expects others to express their views
- Fosters a family spirit
- Catalyst to develop potential of individuals

Stressors
- Conflict, competition, aggression
- Insensitivity, insincerity
- Paper before people

Thinkers

Leadership Style
- Expects intelligence competence
- Sets high standards & expectations
- Expects independence & autonomy

Stressors
- Rules & restrictions
- Interpersonal conflicts & unfairness
- Routine & repetition

Planners

Leadership Style
- Clearly defined expectations
- Shared responsibility
- Expects preparedness, punctuality

Stressors
- Ambiguity, surprises, changing details
- Lack of structure or direction
- Incomplete tasks

Information

▶ Did you know? 35% of general population tend to represent traits of Movers and Planners what does that mean for your team and communication?

Kruger, S. Med. (2016, May, 22) True Colors: The Personality of Education

Activity: Break Out Groups

▶ In small groups, reflect on a time when you were on a team that functioned well.

▶ What was the context? Example: Hospital, Community-setting; for students this could be within a school group project

▶ What worked for this team to function? How come?

▶ Reflect on the Descriptors of Movers, Givers, Thinkers and Planners; was there a predominate colour in the group/team, were the traits of the colours possibly impacting collaboration?

▶ *If there was a good distribution of colours, what will that mean for group collaboration?*

▶ Decide on the person who can facilitate the conversation and choose a different person to share one or two thoughts with the larger group.

Large Group Debrief: Positive Team Functioning

GROUP DISCUSSION

Politeness · Team work · Social skills and behavior · Leadership skills · Listening ability · Communication skills · Confidence · General Awareness · Problem solving skills

- ▶ What was the context? Example: Hospital, Community-setting; for students this could be within a school group project

- ▶ What worked for this team to function? How come?

- ▶ Reflect on the Descriptors of Movers, Givers, Thinkers and Planners; was there a predominate colour in the group/team, were the traits of the colours possibly impacting collaboration?

- ▶ *If there was a good distribution of colours, what will that mean for group collaboration?*

Addressing Barriers to Change: From the Students

► Increased awareness of community issues relevant to patient/community care (Langford, Gordon, & Loeseer, 2020)

► Relationships and connections with peers and community increased team functioning and the role of the community teaching the student; relationships that developed supported advocacy in recognizing barriers to accessing services (Hu et al., 2018)

► Students appreciated inclusion of non-traditional health care providers in IPE supports research to expand IPE beyond typical health disciplines to include professions such as engineers, police and teachers (Lie et al., 2018; Barr et al., 2005)

Theme 2: Comprehensive Knowledge:

► "…the new IPE competencies I gained will influence the way I work with colleagues to provide the most efficient, patient-centred care" (Reese, Undergraduate Health)

Subthemes: System-Level Change, Utilization of CIHC, Collaboration, Self-Awareness, Leadership

► This theme includes the knowledge and skills of different professions which supported more comprehensive approaches to health promotion workshops. Increased awareness of community resources support referrals to address growing diversity of population health; thereby creating more inclusive and efficient patient/community centred care.

Thank you: for all that you do in the care of so many

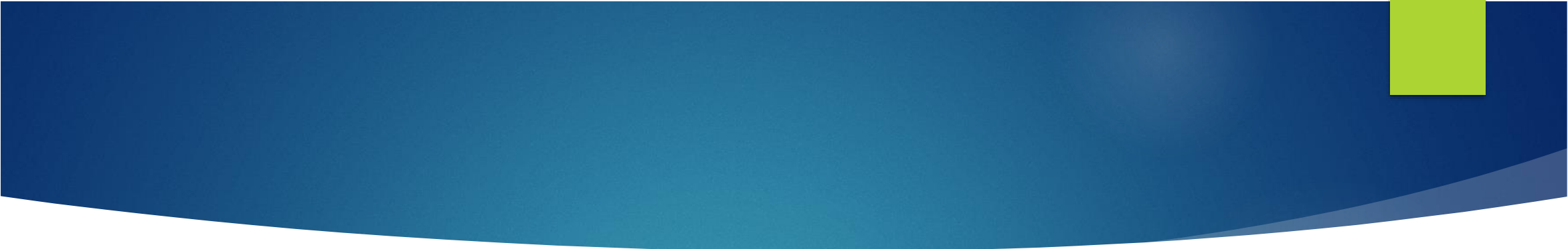

- On that note…

Session Evaluation and Outcome Assessment
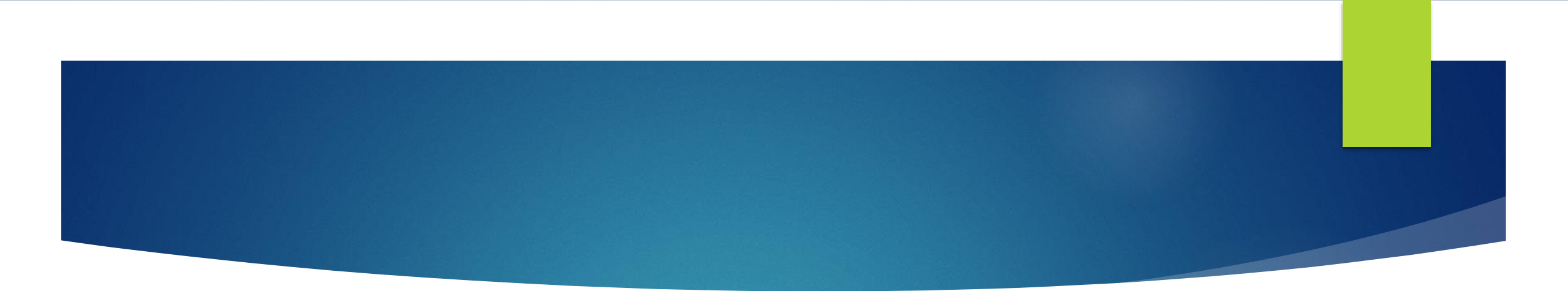
These short forms serve important functions!

- For speakers: Your responses help them understand their strengths and weaknesses, participant learning needs, and teaching outcomes
- For the CEPD office:
  - To plan future programs
  - For quality assurance and improvement
  - To demonstrate compliance with national accreditation requirements
- For YOU: Reflecting on what you've learned and how you plan to apply it can help you enact change as you return to your professional duties

- Please take 3-5 minutes to fill the evaluation form out. Thank you!

Session Evaluation and Outcome Assessment

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