

# Facilitating Interprofessional Collaboration at the Organizational Level

Networking and Discussion for Health Leaders

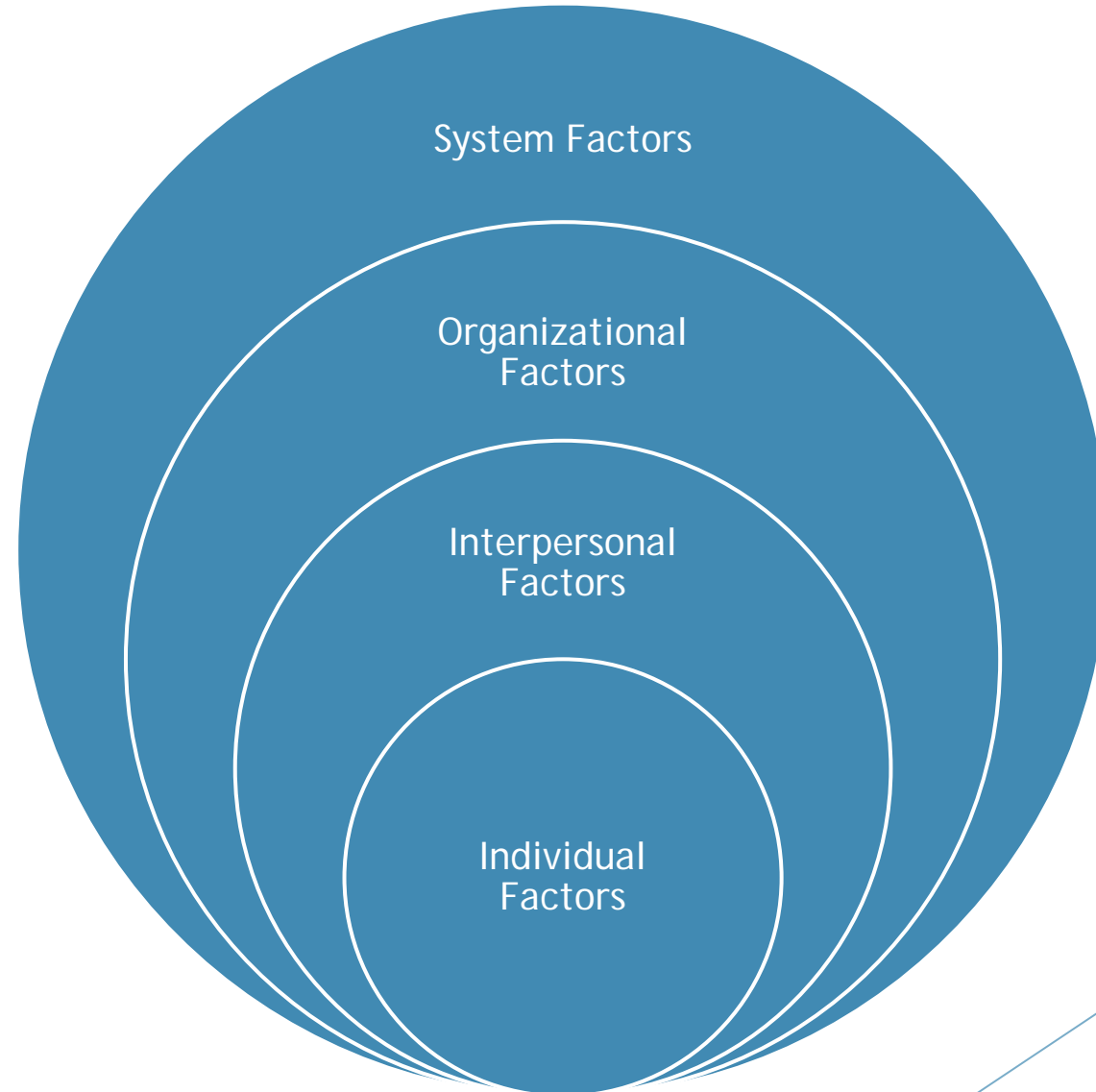
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- ▶ Positive outcomes of interprofessional practice are well established in the literature (CIHC, 2009)
- ▶ IPC advances ideas and innovation at high levels throughout a health organization, improving health services management and healthcare system effectiveness (CIHC, 2009)
- ▶ However, evidence of ongoing organizational change to support interprofessional practice is lacking (Braithwaite, Westbrook & Travaglia, 2007)

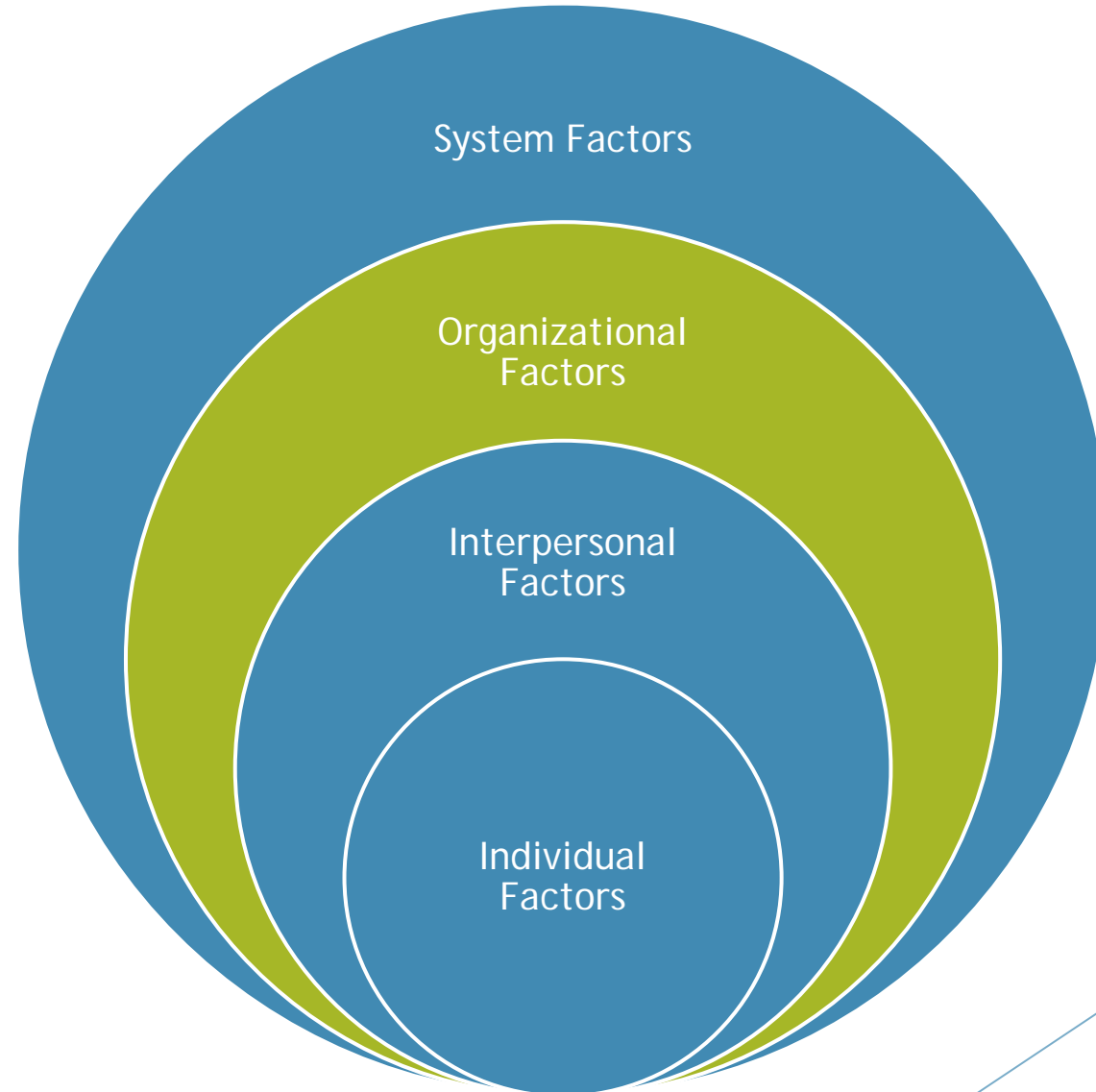
# Interactive Systems of Influence on IPC

- ▶ IPC is implemented, supported, and sustained within an interactive network of factors at individual, interpersonal, organizational and systemic levels

# Interactive Systems of Influence on IPC



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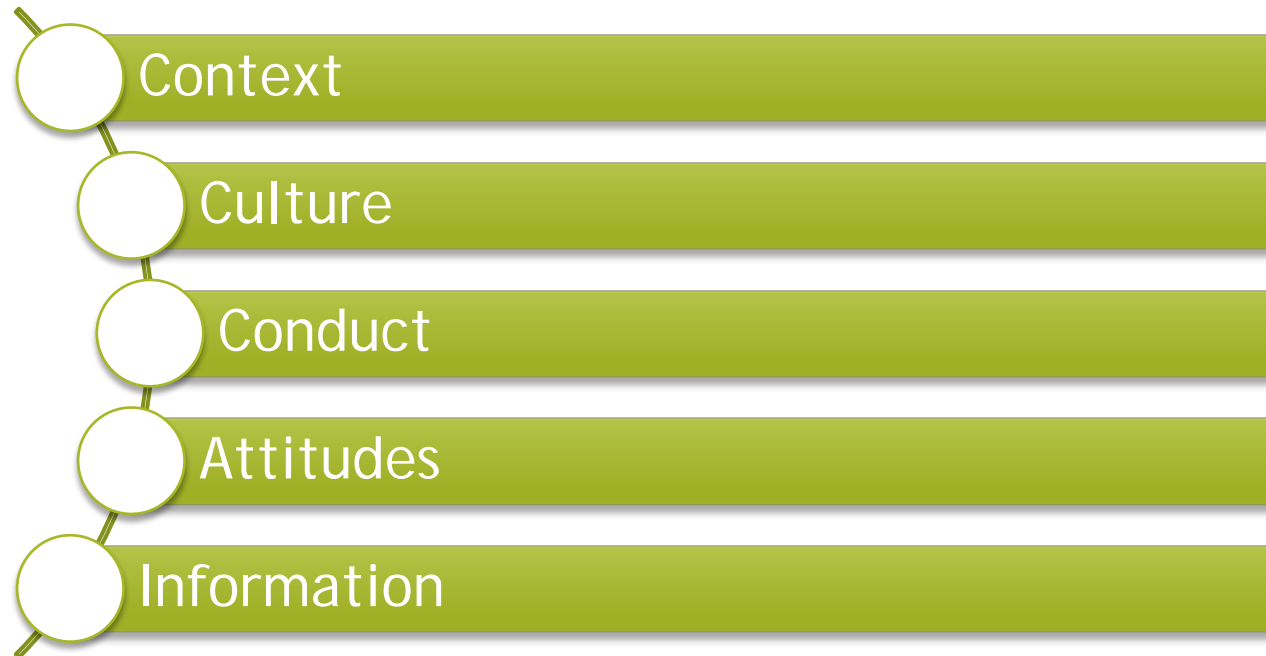
- ▶ To integrate interprofessional collaboration throughout health systems, organizations must support interprofessional team function.

# Discussion Aim

- ▶ Network with other organizational leaders who are IPC engaged
- ▶ Share current approaches and challenges
- ▶ Facilitate ideas and discussion about *what now* and *what next* in developing IPC supportive organizations

# Discussion Framework

- ▶ Interprofessional Praxis Audit Framework (Greenfield, Negus, Travaglia & Braithwaite, 2010)







# Context

- ▶ The setting in which interprofessional practice takes place
- ▶ External policies, guidelines, funding structures, or protocols that enact or inhibit interprofessional collaboration
- ▶ Internal organizational context may include existing organizational structures for reporting or decision making, physical space and institutional design, and concurrent organizational change

# Context

## IPC Considerations for Organizational Structure:

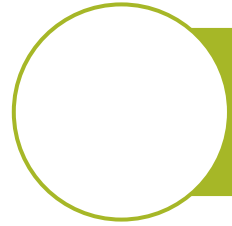
- ▶ How are decisions made in your organization? Are decisions centralized, or do multiple stakeholders (professions, patients, and others) have input?
- ▶ What effects do organizational reporting and responsibility structures have on interprofessional collaboration?
- ▶ Ask others in your organization, at all levels, about their knowledge and perception of organizational structures, and how they support interprofessional collaboration. Is there consistent understanding, or a lack of clarity?

## IPC Considerations for Physical Space and Institutional Design:

- ▶ Capitalize on any plans for physical space design, redesign, or evaluation to include interprofessional perspectives in planning and implementation.
- ▶ Reflect on territorialism and terminology used to name and describe workspaces shared between professions. Facilitate changes that encourage cooperation and collaboration. Consider both social and work spaces in how they support IPC.

## IPC Considerations for Concurrent Organizational Change:

- ▶ Identify recent, ongoing, and upcoming change in your organization. How will these affect interprofessional practice?
- ▶ Establish organizational priorities for change. Align resources, messaging, and actions with these priorities.
- ▶ Plan a developmental process of practice change, inviting input and feedback from stakeholders.



# Culture

- ▶ The beliefs, values, attitudes and norms of behaviour shared by individuals within the organization
- ▶ Has a central role in supporting some practice behaviours and inhibiting others

# Culture

## IPC Considerations for Organizational Culture:

- ▶ Identify and name aspects of your organization's culture that will support and challenge interprofessional collaboration.
- ▶ Consider culture as part of the context for planning IPC practice change and program implementation. Align change strategies with this unique context.
- ▶ Link interprofessional collaboration with established organizational values, such as patient centred care or quality improvement. Communicate the linkage and common outcomes between these values clearly throughout your organization.

# Conduct

- ▶ Includes both structured and unstructured behaviours within an organization
- ▶ Key consideration should be directed at both senior and unit specific levels of leadership
- ▶ Central concepts include communication, consistency, and decisions made regarding resource allocation

# Conduct

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# Attitudes

- ▶ The orientation towards IPC held by those within an organization
- ▶ While influenced by previous education, experiences, or interactions, team member attitudes can also be supported or enhanced by organizational factors, particularly human resource factors

# Attitudes

## IPC Considerations for Human Resource Factors:

- ▶ Evaluate current staff recruitment, selection, and evaluation strategies. Do they place value on interprofessional collaboration?
- ▶ Consider the professions who make up the healthcare teams within the organization. Aim to increase diversity of occupations, competencies, skill sets and experience within healthcare teams.
- ▶ Provide interprofessional staff development centred on communication, teamwork, conflict resolution, and trust





# Information

- ▶ How organizations and those within them represent themselves and their actions through the collection and reporting of data
- ▶ Particular consideration should be given to outcome and evaluation measures, including timelines, end-models, and expected impacts

# Information

## IPC Considerations for Outcome and Evaluation Measures:

- ▶ Integrate the specific organizational context into planned interprofessional practice implementation.
- ▶ In evaluation of IPC practice implementation, consider both expected outcomes, as well as unanticipated effects.
- ▶ Consider how external funding, election, administration, or strategic development cycles may impact evaluation of interprofessional practice implementation.

*What Now and What Next...*

The background features abstract, overlapping geometric shapes in various shades of blue and green, primarily concentrated on the right side of the frame. The shapes are semi-transparent, creating a layered effect. The overall aesthetic is clean and modern.

# *What Now and What Next...*

Patient, provider, organization and system benefits, as applied by individual organizations within their specific cultures and contexts