

The Effectiveness of Interprofessional Role Clarification in Licensed Health Care Practitioners in Rural and Smaller Community Hospitals



Dianne Allen PhD (c), Dr. Carole Orchard,
Dr. Marilyn Evans, Dr. Eunice Gorman, Dr. Michael Kerr
Western University, London ON

Session Agenda

- Background, Significance & Purpose
- Literature Review
- Study Framework & Research Questions
- Research Methods, Data Collection & Analysis
- Nursing and IP Implications

Background

- IPCP is emphasized for safe effective client care

(College of Nurses of Ontario, 2016; College of Occupational Therapists of Ontario, 2017; College of Physicians and Surgeons of Ontario, 2007; College of Physiotherapists of Ontario, 2017; Ontario College of Social Workers and Social Service Workers, 2015)

- Current demand for HCPs to function in variety of roles
- Not all health and social care practitioners (HCPs) have practiced or been educated in settings that highlight role clarification

Significance

- Without collaborative sharing, IP team members can experience uncertainty of their role contribution
(Adams, Orchard, Houghton & Ogrin, 2012)
- Lack of role clarity can be a source of conflict between team members (Brown et al., 2011)
- Practitioners must reflect on and gain self-awareness about own and others' roles (Orchard, Bursay, Pederson & Virelli, 2016)

Study Purpose

1. Explore & describe factors that contribute to effective interprofessional role clarification (IPRC) in HCPs
2. Test and refine a theoretically-derived model

Concept Analysis

- Role
- Clarify (Clarification)



(Walker & Avant, 2005)

Antecedents, Attributes & Consequences

Antecedents

- At least two team members
- Opportunities for role socialization
- Willingness to engage in collaborative practice
- Possession of knowledge, skills, and judgments of one's own profession

Attributes

- Engagement in formal and informal communication about own and others' roles
- Demonstration of professional knowledge and practice competency
- Embracement of new learning about roles
- Ability to weigh patient benefits for inclusion of different health care professions using a client-centred approach

Consequences

Patients

- Improved safety and quality of care
- Satisfaction with care

IP Team Members

- Greater understanding of role capacities of IP colleagues
- Greater role certainty thereby minimizing stressors
- Job satisfaction

Healthcare Organizations

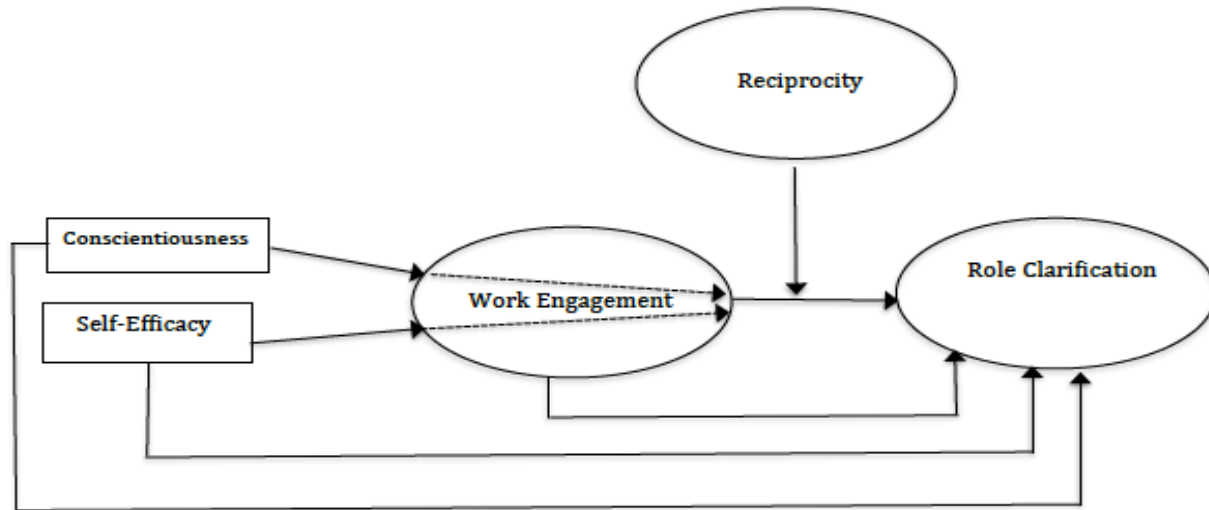
- Positive environment for IP workforce retention
- Cost-effective quality care

Operational Definition

Interprofessional Role Clarification (IPRC)

“ a dynamic process and outcome that requires at least two health care members who have the knowledge, skills, clinical judgment, and competence to engage in formal and informal communication to ascertain understanding about their own and others’ roles for a shared client-centred approach to care” (Allen & Orchard, 2017).

Theoretical Framework



Personal Resources

- Professional role preparation & experiential learning shape knowledge, skill and expertise (Bandura, 1982; Hardy & Conway, 1988)
- Personal resources can influence:
 - Preparedness to engage in IP work interactions
 - *How & If* HCPs choose to learn about similar and different perspective (Bandura, 1982; Hardy & Conway, 1988; John & Srivastava, 1999)
- Resources contributes independently
 - Conscientiousness (*C*) Self-efficacy (*SE*)

Conscientiousness

Definition

“Socially prescribed impulse control that facilitates task and goal-directed behavior” (John & Srivastava, 1999, p. 30)

Conscientiousness

- Predictor of work performance (Barrick, Mount & Judge, 2001)
- Associated with careful planning, goal setting, persistence in one's role (Barrick, Mount, & Strauss, 1993; Hertz & Donovan, 2000); nurses' level of job satisfaction (Hunsader, 2008); self-efficacy in nursing students (Wilson-Soga, 2009)
- Negative correlation between time pressures & patient safety (Lam & Teng, 2010)
- C moderates effect between role clarity & psychological distress (Miller et al., 1999)
- Positively correlated to work engagement (Christian, Garza & Slaughter, 2011)

Self-Efficacy

Stable and trait-like generalized competence belief that captures motivational belief or a judgment regarding task capabilities (Chen et al., 2004; Chen, Gully, & Eden, 2001)

- IPRC begins by articulating professional role with another. *SE* can
 - mitigate stress by enabling individual to appraise issues as challenges to overcome (Wilson-Soga, 2009)
 - affect feelings of competence (Bandura, 1982; Stasser & Titus, 2003)
 - promote persistency to pursue goals despite difficulties or stressful situations (Consigliani, Di Tecco, & Schaufeli, 2016)

Work Engagement

“... [a] positive, fulfilling, affective motivational state of work-related well-being that is characterized by *vigour*, *dedication*, and *absorption*” (Bakker, Schaufeli, Leiter & Taris, 2008, p. 187)

- Related to employees' well-being and job performance

(Consiglio, Borgogni, Di Tecco & Schaufeli, 2016, Christian et al., 2011)

Reciprocity

- Interdependent social exchange involving bi-directional transactions that may lead to supporting or helping one another to achieve a shared goal

(Cropanzano & Mitchell, 2005; Biddle, 1979)

- *Reciprocity with coworkers* (actual engagement in reciprocal acts with others at work) (Gilliam & Rayburn, 2016)
- Facilitates mutual understanding, achievement of shared goals, cohesiveness (Croker, Trede & Higgs, 2012)

IPRCS Development

- 27 items, 5 point scale (1=*Strongly Disagree* to 5= *Strongly Agree*)
- Content Validity (6/9 IP experts responded)
 - CVI (Lynn, 1985); 2 open-ended questions
- IPRCS Testing (105 IP health care colleagues)
 - Cronbach's alpha = .79 , KMO test = .707, Bartlett ($p=.00$)
 - PCA – overall unsatisfactory results
 - Decision to process with all 27 items

Research Questions

- 1) What are the relationships between HCPs' personal resources (conscientiousness, self-efficacy), work engagement and IP role clarification?
- 2) Does reciprocity moderate the relationship between work engagement and IP role clarification?
- 3) What is the best fit of the model to the study data?
- 4) Is the Interprofessional Role Clarification Scale (IPRCS) a reliable and valid measure of IP role clarification?

Research Methods

- Non-experimental cross-sectional design
- Convenience sample will include licensed HCPs providing client care in smaller community and rural hospital settings (5 hospitals and alliances)
- Sample size large enough to enable EFA and CFA –minimum goal 518 participants

Data Collection

- Demographic data
- 5 Instruments
 - *Big Five Inventory (BFI)* (John, Donahue & Kentle, 1991)
 - *New General Self-Efficacy Scale (NGSE)* (Chen et al., 2001)
 - *Utrecht Work Engagement Scale Short Questionnaire (UWES-9)* (Schaufeli et al., 2006),
 - *Reciprocity with Coworkers* (Gilliam & Rayburn, 2016)
 - *Interprofessional Role Clarification Scale (IPRCS)* (Allen & Orchard, 2016)
- Online or paper-based questionnaires

Analysis

- Descriptive statistics (*M, SD, medians, sums, ranges of maximum & minimum*)
- IPRCS factor analysis and validation to verify factor structure (Levine, 2005)
- Compare to proposed measurement model to assess goodness of fit (χ^2 , CFI, & RMSEA)
- SEM to specify and estimate study model's linear relationship among variables and directional influences

Current Stage of Research??

- Ethical approval
 - Western University Health Science REB
 - Hospitals or hospital alliance REBs



- Next steps – Recruitment and Data collection

Implications

Contributions to

- Development of IPRC as IP competency in health care practice and education
- Support to IP culture of certainty and well-being
- Nursing practice (RN and RPN roles)

Provide new knowledge about factors that contribute to HCPs' role fit/sharing for

- Safe, effective care
- Positive working environment
- Development of training to engage in IPRC

Questions or Comments?

Thank You!



http://www.clipartpanda.com/clipart_images/group-discussion-25532518

References

- Adams, T. L., Orchard, C., Houghton, P., & Ogrin, R. (2014). The metamorphosis of a collaborative team: from creation to operation. *Journal of Interprofessional Care*, 28(4), 339–44. <http://doi.org/10.3109/13561820.2014.891571>
- Allen, D. & Orchard, C. (2017). Concept Analysis of Role Clarification (Unpublished manuscript). Western University, London ON
- Bandura, A. (1982). Self-efficacy mechanism in human agency. *American Psychologist*, 37(2) 122-147.
- Bakker, A. B., Schaufeli, W. B., Leiter, M.P. & Taris, T. W., (2008). Work engagement: An emerging concept in occupational health psychology. *BioScience Trends*, 2(1), 2. <http://doi.org/10.1080/02678370802393649>
- Barrick, M. R., Mount, M. K., & Judge, T. A. (2001). Personality and performance at the beginning of the new millennium: What do we know and where do we go. *International Journal of Selection and Assessment*, 9, 9–30.
- Barrick, M. R., Mount, M. K., & Strauss, J. P. (1993). Conscientiousness and performance of sales representatives: Test of the mediating effects of goal setting. *Journal of Applied Psychology*, 78, 715–722.
- Biddle, B. (1979). *Role theory: Expectations, identities, and behaviors*. New York, NY: Academic.
- Brown, J., Lewis, L., Ellis, K., Stewart, M., Freeman, T. R., & Kasperski, M. J. (2011). Conflict on interprofessional primary health care teams – can it be resolved? *Journal of Interprofessional Care*, 25, 4–10.

References cont'd

- Chen, G., Gully, S. M., & Eden, D. (2001). Validation of a New General Self-Efficacy Scale. *Organizational Research Methods, 4*(1), 62–83. <http://doi.org/10.1177/109442810141004>
- Christian, M. S., Garza, A.S, & Slaughter, J.E. (2011). Work engagement : a quantitative review and test of its relations with task and contextual performance, *Personnel Psychology, 64*, 89–136.
- College of Nurses of Ontario (2016). *Competencies for entry-level registered nurse practice*. Retrieved from http://www.cno.org/globalassets/docs/reg/41037_entrytopracitic_final.pdf
- College of Occupational Therapists of Ontario (2017). *Professional Obligations and Responsibilities of OTs*. Retrieved from <https://www.coto.org/quality-practice/professional-obligations>
- College of Physicians and Surgeons of Ontario (2007). *The Practice Guide*. Retrieved from <http://www.cpso.on.ca/Policies-Publications/The-Practice-Guide-Medical-Professionalism-and-Col/Principles-of-Practice-and-Duties-of-Physicians>
- College of Physiotherapists of Ontario (2017). *Standards for professional practice: Concurrent treatment of a patient by a physiotherapist and another health care professional*. Retrieved from http://www.collegept.org/Assets/websiteregistrants/guideenglish/standards_framework/standards_practice_guides/StandardConcurrentTreatmentOfPatient.pdf

References cont'd

- Consiglio, C., Borgogni, L., Di Tecco, C., & Schaufeli, W. B. (2016). What makes employees engaged with their work? The role of self-efficacy and employee's perceptions of social context over time. *Career Development International*, 21(2), 125–143.
- Crocker, A., Trede, F., & Higgs, J. (2012). Collaboration: what is it like? – phenomenological interpretation of the experience of collaborating within rehabilitation teams. *Journal of Interprofessional Care*, 26(1), 13–20. <http://doi.org/10.3109/13561820.2011.623802>
- Cropanzano, R., & Mitchell, M. S. (2005). Social exchange theory: An Interdisciplinary Review. *Journal of Management*, 31(6), 874–900. Retrieved from <http://doi.org/10.1177/0149206305279602>
- Gilliam, D. A., & Rayburn, S. W. (2016). Propensity for reciprocity among frontline employees. *Journal of Services Marketing*, 30(3), 290–301. <http://doi.org/10.1108/JSM-05-2015-0194>
- González-Roma, V., Schaufeli, W.B., Bakker, A.B. & Lloret, S. (2006). Burnout and engagement: Independent factors or opposite poles? *Journal of Vocational Behavior*, 68, 165-174.
- Hardy, M. & Conway, M. (1988). *Role theory: Perspectives for health professional*. Norwalk CT: Appleton & Lange.

References cont'd

- Hunsader, M. (2008). Personality traits and career satisfaction in the nursing profession. Ph.D. diss., California State University, Fresno. Retrieved from <https://www.lib.uwo.ca/cgi-bin/ezpauthn.cgi?url=http://search.proquest.com/docview/304842749?accountid=15115> (accessed February 1, 2017).
- Hurtz, G. & Donovan, J. (2000). Personality and Job Performance: The Big Five Revisited. *Journal of Applied Psychology*, 85(6), 869–879.
- John, O. P., Donahue, E. M., & Kentle, R. L. (1991). *The Big Five Inventory--Versions 4a and 5a*. Berkeley, CA. University of California, Berkeley, Institute of Personality and Social Research.
- John, O., & Srivastava, S. (1999). The big-five trait taxonomy: History, measurement, and theoretical perspectives. In *Handbook of personality: Theory and research* (2nd ed.) (pp. 102–138). Retrieved from http://www.rc.usf.edu/~jdorio/Personality/BIG_FIVE_TRAIT_TAXONOMY.pdf
- Lam & Teng (2010). Time Pressure, Nurse Conscientiousness and Patient Safety. Sigma Theta Tau International Conference. Retrieved from www.sti.iupui.edu/pp07/congress10/lam_s.pdf
- Ontario College of Social Workers and Social Service Workers (2015). Code of Ethics and Standards of Practice Handbook (2nd edition) (2008). Retrieved from http://www.ocswssw.org/content/uploads/2015/05/Code_of_Ethics_and_Standards_of_Practice_Handbook_2nd_Edition_2008.pdf

References cont'd

- Orchard, C., Burse, S., Peterson, L., & Verrilli, S. (2016). Can Workshops Provide a Way to Enhance Patient/Client Centered Collaborative Teams?: Evidence of Outcomes from TEAMc Online Facilitator Training and Team Workshops. *International Journal of Practice-Based Learning in Health and Social Care*, 4(2), 73–87. <http://doi.org/10.18552/ijpblhsc.v4i2.352>
- Polit, D. F., & Beck, C. T. (2008). *Nursing research: generating and assessing evidence for nursing practice (8th ed.)*. Philadelphia PA: Lippincott
- Stasser, G., & Titus, W. (2003). Hidden profile: A brief history. *Psychological Inquiry*, 14, 304–313.
- Wilson-Soga, N. (2009). *Personality traits, self-efficacy of job performance, and susceptibility to stress as predictors of academic performance in nurse education programs*. Unpublished doctoral dissertation). Walden University, Minneapolis, MN