Interprofessional practice: Key benefits & challenges in delivering effective care

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Overview

Key Concepts
Emergence
Successes & Tensions
Improving IP practice
Concluding Comments
Key Concepts
Definition

Individuals from two or more health/social care professions who work together to deliver services to patients/clients in an effective manner (Barr & colleagues)
Aims

Bringing together skills/knowledge
Sharing information
Achieving continuity of care
Apportioning/ensuring responsibility
Resource planning
Coordination of service delivery
Underpinning elements

Common purpose
Clear roles & meaningful tasks
Interdependence
Reliance on the expertise of others
Regular interaction
Balance of leadership & democracy
Shared planning/decision-making
Organisational support
Ongoing team-based education
Feedback on performance
Respect, trust & humour
“...requires many types of sharing: shared knowledge, shared values, shared responsibility, shared outcomes and shared visions” (Henneman & colleagues)
“...is a cooperative venture is based on shared power and authority. It is non-hierarchical in nature” (Kraus)
Types of interprofessional practice

Networking
Coordination
Collaboration
Teamwork

Reeves & colleagues
Emergence
Global Developments

Quality & safety
Demographic shifts
Chronic care
Rising costs
Patient centredness
Media coverage
Policy maker support

National
Australia, Brazil, Canada
Japan, New Zealand, Switzerland
United Kingdom, United States, etc.

International
World Health Organization
Organisations & networks promoting IP practice

Centre for the Advancement of Interprofessional Education (1987)

Nordic Interprofessional Network (2001)

European Interprofessional Network (2004)

Canadian Interprofessional Health Collaborative (2006)

National US Center for Interprofessional Practice & Education (2013)

Brazilian Interprofessional Network (2015)
Some benefits
For professionals

Mutual support

Quality of relationships

Staff morale
Interprofessional reflexivity

“...involves the members of the team standing back and critically examining themselves, their processes and their performance to communicate about these issues and to make appropriate changes” (West)
Patient care

Responsiveness

Improved satisfaction

Reduction of error (and near misses)

Improved quality & safety
Systems

Improved coordination of services
Reducing duplication
Lower costs
More effective use of resources
Some challenges
**Size**

Large teams/groups – increased difficulty:
   Communication, coordination, decision-making

30 member groups – small organizations

Ideal team size: 10-12 members

“small teams are informed, big teams infer” (West)
Space & time

Floors separating offices can reduce IP interactions by 30% (Handy)

Time limits: heavy profession-specific workloads

Teamworking vs. ‘Knotworking’ (Engeström & colleagues)
Exchange

Interprofessional practice:

- Not an *altruistic* act
- Requires mutual gain (pay-off)
- Need to make exchange *explicit* (Hudson)
Risk

Unpredictable process

Uncertain outcomes, possible failure

Collaborator with ‘other side’

Notion of cultural suicide  (Brookfield)
Competing interests

“when individuals and groups come together ... there is representation of different and often competing interests [which] can generate tensions and conflicts”

(Beattie)
Wider professional & cultural factors

Differing values & ideologies

Socio-political & economic inequalities

Power & authority imbalances

Gender & ethnicity issues (Freidson, Abbott, Witz)
Improving IP Practice
‘Diagnosis & Treatment’

Iterative 3 phase process:
1. Assessment
2. Intervention
3. Evaluation
1. Assessment

![Diagram showing the relationship between relational, processual, organisational, and contextual factors affecting interprofessional teamwork.](image)

**Figure 4.1** A framework for understanding interprofessional teamwork.

Reeves & colleagues
2. Intervention

Interprofessional Education

Formal team learning (e.g. simulation, retreats)
Informal learning activities (informal learning)
Interprofessional practice

Interprofessional meetings (e.g. problem solving)
Checklists & care pathways
Interprofessional Organisational
Collaborative guidelines & procedures
Changes to workplaces & spaces
3. Evaluation

Mixed methods
- Surveys/questionnaires
- Interviews/focus groups
- Observations
- Documents
Repeat as needed
Concluding comments

Continued need for IP practice
Growing benefits
Impeded by multiple challenges
Assessment, intervention & evaluation
Useful source
Thank you

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