

# The What, Why, and How of Collaborative Practice

Developing skills.  
Evidence and resources  
to support collaborative practice.





## 1. Welcome

Welcome to The What, Why, and How of Collaborative Practice.

*This document is a print-friendly version of the elearning unit. Here you will find a screenshot of each page in the unit (left column), and a transcript of the voiceover (this column), with some modifications to make them work in a non-interactive format. While this document lacks interactivity, it may be preferred by some learners who prefer reading or who lack a robust internet connection.*



## 2. Project collaborators

This project is a joint initiative of Alberta Health Services and the University of Alberta, in partnership with Covenant Health, and funded by Alberta Health.

## Elearning tips

### Social and solo learning.

You may work through this unit with other participants.

### Timing.

Set aside a specific time to complete this unit and use the full time.

### Sights and sounds.

Adjust your screen brightness and your audio volume to comfortable levels.

### Transcript.

A transcript of each screen is available in the left panel.

INTERPROFESSIONAL CARE PROCESSES



## 3. Elearning tips

A few quick tips before we begin.

- Some people learn best by working in groups, while others need a quiet place to work alone. You are welcome and encouraged to work through this elearning unit with other participants if you wish.
- Set aside a specific time to complete this elearning unit, at a time of day when you feel most alert, and use the full time.
- Adjust your screen's brightness to a comfortable reading level. If possible, sit near a source of natural light. Adjust your headset or speakers to a comfortable listening level.
- Also note that a transcript of each screen is available in the left panel. Click on "Transcript" at the top of the Menu.

## Learning objectives

Upon completion of this elearning unit you will have a greater awareness of:

- Why developing skills for collaborative practice is important;
- The evidence to support collaborative practice; and
- Resources available for more information about collaborative practice.

INTERPROFESSIONAL CARE PROCESSES



## 4. Learning objectives

In this first elearning unit we'll focus on developing a greater awareness of:

- Why developing skills for collaborative practice is important;
- The evidence to support collaborative practice; and
- Resources available for more information about collaborative practice.



## 5. We've always worked in teams

Teamwork is not a new concept. We've all worked in teams as health care providers, and while some teams are high functioning, we know other teams are not.

When teams aren't working well together it can affect patient safety and patient satisfaction. It can also lead to decreased job satisfaction and staff may eventually leave the workplace.

Where and how do we start to address concerns about team functioning?  
 What is your responsibility as a health care provider?



## 6. Why change?

Furthermore, why change at all? Why do we need to change how we work together?

There is evidence from the literature demonstrating that when health care providers across disciplines work together, patient safety increases and patients are more satisfied with their care. This, in turn, increases health care providers' job satisfaction and they are more likely to stay in their job.



## 7. Drivers for change

There are many documents highlighting the rationale and need for collaborative practice. Here are a few of the most important ones in the Alberta context.

Many of these documents recognize that we need to educate health care providers on how to work together effectively, and support them in doing so.

See Appendix A for descriptions and links to these resources.



## 8. Drivers for change

Alberta has a provincial framework that outlines actions for each of the partners. It is important that we all have the same vision and work towards the same goal.

## Intersectoral support for collaborative practice

A few examples from Canada and Alberta:

Governments	 Health Canada Santé Canada	 Alberta Health
Health care organizations	 Alberta Health Services	Educational institutions
 UNIVERSITY OF ALBERTA	Education accreditation bodies	The Accreditation of Interprofessional Health Education Initiative (AIPIHE)
Quality improvement organizations	Professional and regulatory bodies	Alberta College of Family Physicians (ACFP) Alberta College of Medical Diagnostic and Therapeutic Technologists (ACMDTT) Alberta College of Occupational Therapists (ACOT) Alberta College of Paramedics (ACP)
 cpsp icsp	Practitioners and patients	



INTERPROFESSIONAL CARE PROCESSES 

## 9. Intersectoral support

It's also important to note that the government, professional and regulatory associations, health professional organizations, and health professional educators are all committed to developing health care providers with the skills to work collaboratively to provide optimal patient care.

See Appendix B for the list of organizations listed on this slide.

## What can we do?

-  How can we enhance current practice?
-  Intentional development and use of collaborative practice tools.



INTERPROFESSIONAL CARE PROCESSES 

## 10. What can we do?

And so now, if we believe collaborative practice skills are important, and that evidence exists to support this, what can you as a health care provider do to enhance your current practice?

The key is developing and using skills in a very intentional way. There are several collaborative practice tools that can support you in your role as a care provider. You will have an opportunity to learn and practice these tools in later modules.

## Review



We've always worked in teams, but haven't always had the tools to function well.



Poorly functioning teams affect:

- Patient safety
- Patient satisfaction
- Job satisfaction
- Staff recruitment and retention



There are many forces driving the change towards collaborative practice, including Alberta's framework.



To enhance our current practice we need to intentionally develop and use collaborative practice tools.

INTERPROFESSIONAL CARE PROCESSES



## 11. Review

Let's review what we've learned in this unit.

- We've always worked in teams, but haven't always had the tools to function well.
- Poorly functioning teams affect patient safety, patient satisfaction, job satisfaction, and staff recruitment and retention.
- There are many forces driving the change towards collaborative practice, including Alberta's framework for change.
- To enhance our current practice we need to intentionally develop and use collaborative practice tools.

## Reflection

Why is collaborative practice important?

What further knowledge do you need to improve your competence in collaborative practice? How will you obtain that knowledge?



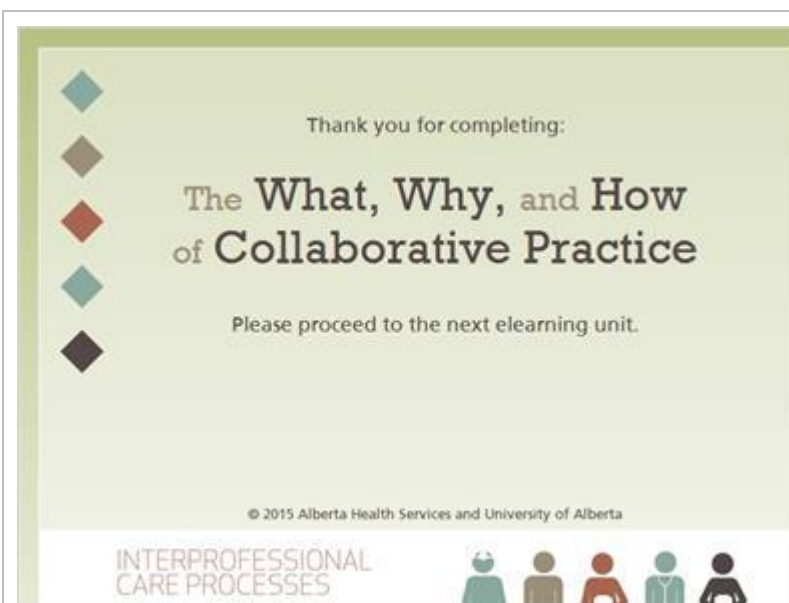
INTERPROFESSIONAL CARE PROCESSES



## 12. Reflection

Now take a moment and reflect on these questions or discuss them with your colleagues.

- How would you explain, in your own words, why collaborative practice is important?
- What further knowledge do you need to improve your competence in collaborative practice? How will you go about obtaining that knowledge?



### 13. Thank you

Thank you for completing The What, Why, and How of Collaborative Practice. Please proceed to the next elearning unit.

For more information about collaborative practice and this elearning unit, please visit the Virtual Interprofessional Educator Resource (VIPER): <http://www.hserc.ualberta.ca/TeachingandLearning/VIPER/>



### 14. Acknowledgements

See Appendix C for acknowledgements and image credits.



## Appendix A: Drivers for change

Alberta Health. (2012). *Collaborative practice and education framework for change*. Retrieved from Government of Alberta website: <http://www.health.alberta.ca/initiatives/collaborative-practice-education.html>

Alberta Health. (2012). *Collaborative practice and education workplan for change*. Retrieved from Government of Alberta website: <http://www.health.alberta.ca/initiatives/collaborative-practice-education.html>

The *Framework* document aims to align the interprofessional practice work occurring across provinces into a single model with a common set of principles. The *Workplan* companion document outlines priority actions for government, education partner, professional bodies and service delivery organizations to support collaborative practice.

Canadian Interprofessional Health Collaborative (CIHC), Accreditation of Interprofessional Health Education (AIPHE). (2011). *Principles and practices for integrating interprofessional education into the accreditation standards for six health professions in Canada*. Retrieved from Canadian Interprofessional Health Collaborative website: <http://www.cihc.ca/files/resources/public/English/AIPHE%20Principles%20and%20Practices%20Guide%20-%20v.2%20EN.pdf>

Canadian Interprofessional Health Collaborative (CIHC), Accreditation of Interprofessional Health Education (AIPHE). (2011). *Interprofessional health education accreditation standards guide*. Retrieved from Canadian Interprofessional Health Collaborative website: [http://www.cihc.ca/files/resources/public/English/AIPHE%20Interprofessional%20Health%20Education%20Accreditation%20Standards%20Guide\\_EN.pdf](http://www.cihc.ca/files/resources/public/English/AIPHE%20Interprofessional%20Health%20Education%20Accreditation%20Standards%20Guide_EN.pdf)

In Canada, the Accreditation of Interprofessional Health Education (AIPHE) initiative has developed principles and standards to ensure that interprofessional education (IPE) standards are integrated into the accreditation programs of participating pre-licensure programs. AIPHE is a national collaborative of eight organizations that accredit pre-licensure education for physical therapy, occupational therapy, pharmacy, social work, nursing, and medicine in Canada.

Canadian Interprofessional Health Collaborative (CIHC). (2010). *A national interprofessional competency framework*. Retrieved from CIHC website: [http://www.cihc.ca/files/CIHC\\_IPCompetencies\\_Feb1210r.pdf](http://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210r.pdf)

The CIHC competency framework focuses on the ability to integrate knowledge, skills, attitudes, and values in arriving at judgments in support of interprofessional collaboration.

Interprofessional Education Collaborative Expert Panel. (2011). *Core competencies for interprofessional collaborative practice: Report of an expert panel*. Interprofessional Education Collaborative (IPEC). Retrieved from American Association of Colleges of Nursing website: <http://www.aacn.nche.edu/education-resources/ipecreport.pdf>

This document presents a set of interprofessional collaborative competencies intended to guide interprofessional education in the US. It is “inspired by a vision of interprofessional collaborative practice as key to the safe, high quality, accessible, patient-centered care desired by all.”

Lingard, L. (2013). *Dr. Lorelei Lingard - Collective Competence, TEDxBayfield*. [Video file]. Retrieved from YouTube website: <https://www.youtube.com/watch?v=vl-hifp4u40>

This video makes the case for thinking differently about competence in health care. Dr. Lingard argues for a shift in emphasis to how practitioners work competently together – within and between teams – and the impact that acting on this shift in thinking can have on care outcomes.

Maxfield, D., Grenny, J., McMillan, R., Patterson, K., & Switzler, A. (2005). *Silence kills: The seven crucial conversations in healthcare*. Retrieved from American Association of Critical-Care Nurses (AACN) website: <http://www.aacn.org/WD/Practice/Docs/PublicPolicy/SilenceKills.pdf>

This report speaks to the challenges that team members encounter related to communication around conflict and the impact of this challenge on patients and staff.

Romanow, R. J. (2002). *Building on values: The future of health care in Canada - final report* (Report No. C2002-980275-X). Retrieved from Government of Canada Publications website: <http://publications.gc.ca/pub?id=237274&sl=0>

The Commission for the Future of Health Care in Canada, or the Romanow Commission, investigated the status of health care in Canada and made recommendations for change. It is one of the first reports in Canada that highlights the importance of interprofessional education and learning for health care professionals. The report identifies interprofessional education as one key focus in building a more efficient health care system that meets the needs of Canadians.

University of Alberta, Health Sciences Education and Research Commons (HSERC). (2010).

*Interprofessional learning pathway competency framework*. Retrieved from University of Alberta website:

<http://www.hserc.ualberta.ca/TeachingandLearning/VIPER/EducatorResources/CompetencyFramework.aspx>

The University of Alberta's competency framework offers a guide for building interprofessional learning outcomes into classroom and clinical/practical learning experiences. The competency contains four core interprofessional competencies: communication, collaboration, role clarification, and reflection.

World Health Organization, Department of Human Resources for Health, Health Professions Networks Nursing and Midwifery Office. (2010). *Framework for action on interprofessional education and collaborative practice* (WHO Publication No. WHO/HRH/HPN/10.3). Retrieved from World Health Organization website: [http://www.who.int/hrh/resources/framework\\_action/en/](http://www.who.int/hrh/resources/framework_action/en/)

The report identifies the mechanisms that shape successful collaborative teamwork and outlines a series of action items that policy-makers worldwide can apply within their local health system. Users of this global framework are encouraged to adapt it to fit their needs in a local level by: “examining their local context to determine their needs and capabilities; committing to building interprofessional collaboration into new and existing programmes; [and] championing successful initiatives and teams” (13).

## Appendix B: Intersectoral support for collaborative practice

A few examples from Canada and Alberta.

- Governments: Health Canada, Alberta Health
- Health care organizations: Alberta Health Services
- Educational institutions: University of Alberta
- Education accreditation bodies: Accreditation of Interprofessional Health Education Initiative (AIPHE)
- Quality improvement organizations: Canadian Patient Safety Institute
- Practitioners and patients
- Professional and regulatory bodies:

Alberta College of Family Physicians (ACFP)

Alberta College of Medical Diagnostic and Therapeutic Technologists (ACMDTT)

Alberta College of Occupational Therapists (ACOT)

Alberta College of Paramedics (ACP)

Alberta College of Pharmacists (ACP)

Alberta College of Social Workers (ACSW)

Alberta College of Speech Language Pathologists and Audiologists (ACSLPA)

Alberta Dental Association and College (ADA+C)

Alberta Medical Association (AMA)

Alberta Therapeutic Recreation Association (ATRA)

Canadian Anesthesiologists' Society (CAS)

Canadian Association of General Surgeons (CAGS)

Canadian Association of Medical Radiation Technologists (CAMRT)

Canadian Association of Occupational Therapists (CAOT)

Canadian Association of Social Workers (CASW)

Canadian Dental Assistants' Association (CDAA)

Canadian Dental Association (CDA)

Canadian Dental Hygienists Association (CDHA)

Canadian Dermatology Association (CDA)

Canadian Medical Association (CMA)

Canadian Nurses Association (CNA)

Canadian Pediatric Society (CPS)

Canadian Pharmacists Association (CPA)

Canadian Physiotherapy Association (CPA)

Canadian Practical Nurses Association (PN Canada)

Canadian Psychiatric Association (CPA)

Canadian Psychological Association (CPA)

Canadian Society for Exercise Physiology (CSEP)

Canadian Society for Medical Laboratory Science (CSMLS)

Canadian Society of Respiratory Therapists (CSRT)

Canadian Therapeutic Recreation Association (CTRA)

College and Association of Registered Nurses of Alberta

(CARNA)

College and Association of Respiratory Therapists of Alberta

(CARTA)

College of Alberta Dental Assistants (CADAA)

College of Alberta Psychologists (CAP)

College of Dietitians of Alberta (CDA)

College of Family Physicians of Canada (CFPC)

College of Licensed Practical Nurses of Alberta (CLPNA)

College of Medical Laboratory Technologists of Alberta

(CMLTA)

College of Physicians and Surgeons of Alberta (CPSA)

College of Registered Dental Hygienists of Alberta (CRDHA)

College of Registered Psychiatric Nurses of Alberta (CRPNA)

Dietitians of Canada (DC)

Paramedic Association of Canada (PAC)

Physiotherapy Alberta College and Association (PT Alberta)

Psychologists Association of Alberta (PAA)

Registered Psychiatric Nurses of Canada (RPNC)

Royal College of Dentists of Canada (RCDC)

Royal College of Physicians and Surgeons of Canada (RCPSC)

Society of Alberta Occupational Therapists (SAOT)

Society of Obstetricians and Gynecologists of Canada (SOGC)

Speech-Language and Audiology Canada (SAC)

## Appendix C: Acknowledgements

These materials were produced for *Better Teams, Better Care: Enhancing Interprofessional Care Processes through Experiential Learning (Interprofessional Care Processes Project)*.

This project is a joint initiative of Alberta Health Services and the University of Alberta, in partnership with Covenant Health, and funded by Alberta Health.

Thank you to all the people and organizations who supported and encouraged this project in countless ways.

For further information about this initiative, please contact the project co-leads: Dr. Sharla King (780-492-2333; [Sharla.King@ualberta.ca](mailto:Sharla.King@ualberta.ca)) and Dr. Esther Suter (403-943-0183; [Esther.Suter@albertahealthservices.ca](mailto:Esther.Suter@albertahealthservices.ca)).

For more information about collaborative practice and this elearning unit, please visit the Virtual Interprofessional Educator Resource (VIPER): [www.hserc.ualberta.ca/TeachingandLearning/VIPER/](http://www.hserc.ualberta.ca/TeachingandLearning/VIPER/)

These materials were published on May 1, 2015.

© 2015 Alberta Health Services and University of Alberta

### Image Credits

*Operating Room Scene*. Notman Studio of Halifax, via Library and Archives Canada (<http://www.collectionscanada.gc.ca/physicians/030002-1000-e.html>). Copyright expired.