

Improving Patient-Centered Care: Optimal Strategies for Interprofessional Communication and Collaboration

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Learning Objectives

- Explain the importance of communication as a core component of interprofessional collaborative practice (IPCP)
- State key competencies and effective tools for successful IPCP communication to improve patient-centered care using Team Strategies and Tools to Enhance Performance and Patient Safety (TeamSTEPPS®) as an example
- Identify common communication barriers that exist within IPCP among health care professionals and strategies to overcome these barriers
- Compare and contrast alternative communication methodologies and identify practical solutions for effective collaboration

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Introductions



Moderator

Mary Jo Jerde, MBA, BSN, RN Senior Vice President, Center for Clinician Advancement, UnitedHealth Group Minnetonka, MN



Panelist

Mark Earnest, MD, PhD, FACP Professor of Medicine Division Head, General Internal Medicine University of Colorado School of Medicine Former Director, Interprofessional Education University of Colorado Anschutz Medical Campus Aurora, CO



Panelist

Barbara Anderson Head, PhD, CHPN, ACSW, FPCN Associate Professor Department of Medicine Affiliated Faculty Kent School of Social Work University of Louisville Louisville, KY



Panelist

Hogai Nassery, MD Atlanta Medical Director Harken Health Atlanta, GA

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Core Competencies/Health Professionals

Provide Patient-Centered Care Work in Interdisciplinary Teams Employ Evidence-Based Practice

Apply Quality Improvement Utilize Informatics

Health Professions Education: A Bridge to Quality, 2003 by the National Academy of Sciences, Courtesy of the National Academies Press, Washington, D.C.

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Competency Defined

"The habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values and reflection in daily practice."

Institute of Medicine. (2003). Health Professions Education: A Bridge to Quality. Washington, DC: The National Academies Press.

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Team Competency Outcomes

Performance

Leadership

Leadership

Mutual
Support

Skills

Attitudes

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 We know that communication is important for all the health care teams. How is it different for IPCP?

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Case Study

80 year old male with End Stage Renal Disease (ESRD), Hypertension, Coronary Artery Disease, Anemia and Hypothyroidism

- · On peritoneal dialysis (PD) for last 7 years
- Care is co-managed by a family nurse practitioner (FNP), acting as his primary care provider (PCP), and a nephrologist
- Two years ago he had an abdominal aneurysm; he and his family decided not to pursue surgical repair
 - He had a central line placed for hemodialysis (HD)
- A dialysis team (nephrologist, nurses from HD and PD teams, social worker, dietician) created a plan for him to transition to permanent HD

Living with a Change in Dialysis Modalities: A Case Study (Phillips, A. (2016). Living with a change in dialysis modalities: A case study. Nephrology Nursing Journal, 43(3), 262-264.

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 What do you see as being a particularly effective method or tool they used and have you seen this used elsewhere?

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Team Competency Outcomes

Performance

Leadership

Leadership

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Attitudes

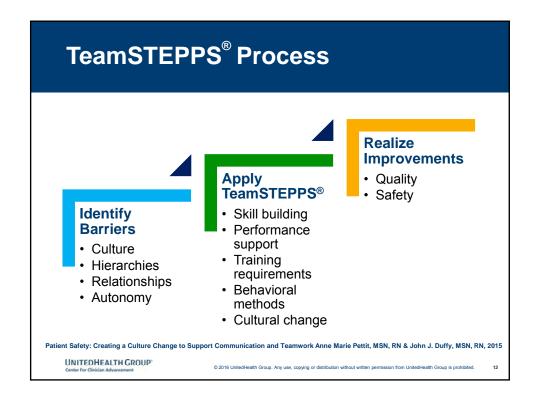
http://www.ahrq.gov/teamstepps/images/tslogotxt.html

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 What do you see as potential barriers for an IPCP team collaborating with each other and the patient, and what would you suggest they do differently?

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 On the path ahead, how can the audience today assess whether their teams are displaying optimal communication competencies in delivering interprofessional collaborative practice?

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Interprofessional Communication Competencies

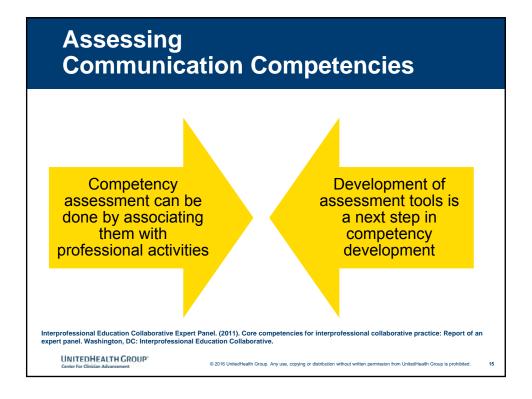
- Use the tools and techniques, including technology, to support team discussions
- Make sure the health care team members are communicating in a way that the patient understands
- Encourage confidence, clarity, and respect, to make sure everyone understands and can create a plan of care
- · Listen to each other well
- Give and receive respect
- Be even more respectful in difficult situations or when there is conflict
- Recognize how one's own experience level, proficiency, culture, and organizational structure impact team effectiveness
- Reinforce how important teamwork is to create consumer-focused

Interprofessional Education Collaborative Expert Panel. (2011). Core competencies for interprofessional collaborative practice: Report of an expert panel. Washington, DC: Interprofessional Education Collaborative.

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Additional Resources

- National Center for Interprofessional Practice and Education https://nexusipe.org/informing/resource-centerNegotiate
- Agency for Healthcare Research and Quality
 http://www.ahrq.gov/teamstepps/index.htmlBeing able to resolve conflict among members of the team.
- Institutes Of Medicine / National Academies http://www.nationalacademies.org/hmd/

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Questions & Answers



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Food for Thought

"Communicating refers to aspects of openness, style, and expression of feelings and thoughts. These communications are directed specifically at modifying teamwork aspects. Team-related communications exploit opportunities that influence team interactions, organization, and functioning."

(Essens et al., 2009)

"Communication, communication, communication — was shared over and over again as a key driver of interprofessional collaboration. Each profession brings with it its own language and way of communicating."

"Open and respectful communication can also contribute to problem-solving as a group, as an 'open discussion of differing perspectives may serve as a stimulus for new questions, growth, and development of the team."

Quotes are in Lessons from the Field: Promising Interprofessional Collaboration Practices. 2015. White Paper, The Robert Wood Johnson Foundation. rwif.org.

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Our Panelists' Work

- Earnest, M., & Brandt, B. (2014).
 Aligning practice redesign and interprofessional education to advance triple aim outcomes. *Journal Of Interprofessional Care*, 28(6), 497-500. doi:10.3109/13561820.2014.933650
- Jones, B., Phillips, F., Head, B. A., Hedlund, S., Kalisiak, A., Zebrack, B., & ... Otis-Green, S. (2014).
 Enhancing Collaborative Leadership in Palliative Social Work in Oncology. *Journal Of Social Work In End-Of-Life & Palliative Care*, 10(4), 309-321. doi:10.1080/15524256.2014.975319
- Renae Moch, MBA, FACMPE, Hogai G. Nassery, MD, and M. Tariq Fareed, MD, FAAFP (2014). Incorporating Medical Interpretation Into Your Practice. Fam Pract Manag, Mar-Apr; 21(2):16-21.

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In Closing

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 http://www.unitedhealthgroup.com/ClinicianAdvancement/Default.aspx
- ► Internal to UnitedHealth Group Join the discussion on the Clinician Commons https://oneconnect.uhg.com/groups/clinician-commons



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