Interprofessional Practice: It’s not just a nice thing to do.

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Presentation objectives

- Understand the concept of interprofessional collaboration (IPC)
- Identify the five core competencies of interprofessional collaboration
- Identify the core principles behind Docecki’s Reflective-Generative practitioner model (1996) and how it relates to IPC
- Understand the seven strategies to facilitate ethical practice within healthcare interprofessional teams.
Interprofessional Practice

- Interprofessional practice (IPP) is intentional and collaborative. It is supported by learning with, from and about one another to leverage individual and team capacity to optimize health outcomes.
Why do we need IPP on teams

- Effective team work can improve the quality of patient care, enhance patient safety, and reduce workload issues that cause burnout among health care professionals (CHSRF, 2005).
- In a study of quality improvement methods with healthcare teams, those with functional group interactions were successful in improving quality while those without functional group interactions were not (Irvine et al., 2002).
Five core competencies of Interprofessional practice

- Knowledge of roles
- Appreciating differences and Conflict resolution
- Trust and respect
- Shared decision-making
- Power sharing
Challenges to IPP in the healthcare environment

- Territoriality/ Turf wars
- Marginalization
- Discrimination
- Power struggles/ Abuses of power
- Competition
- Exclusion
The **reflective generative practitioner** fosters the human development of his/her client and thereby promotes the common good.

**Reflection** refers to the process of openness to discern meaning and solutions.

**Generative** refers to value based action in a caring relationship that is conducive to something new.

( Dokecki, 1996)
The is-ought discrepancy

- We evaluate a situation as it is; the situation ethically challenges us because we find it lacking compared with our values or standards of what should be; and we intervene to lessen or remove the situations is-ought discrepancy.

- Interprofessional practice philosophy is aspirational, inspiring and unifying in that it aims at bridging differences, and finding a common mission of mutual respect, caring and compassion between individuals. However, at the moment, collaboration may be one of the missing pieces of the puzzle in healthcare.
Community and Equality

• **Community**
  A morally right action intends community

• **Equality**
  you cannot have community without equality. Equality is a precondition for good social relations

• **Interprofessional practice** promotes the shift from professional autonomy to **professional communilzation**

• **Interprofessional practice** is about collaboration through equal partnerships
Goods internal vs. Goods External

- Most professionals have to manage the tension between the pursuit of the goods internal to a professional practice (human development of the client and community) and goods external to it (other goods, such as money and self-gratification, selfishly pursued by the profession).

- IPP dictates that professionals realize that one’s profession cannot provide for all client’s health needs and places healthcare providers under a moral obligation to co-operate with others who may share a professional responsibility to ease, lessen or eradicate the suffering in their clients.
Interprofessional practice and moral healthcare environments

• Expand the scope of ethical practice
• Practice discourse ethics as opposed to Code of ethics
• Question your discipline specific professional traditions
• Question the notion of expert – adopt a not knowing attitude
• Create partnerships with clients/members of the healthcare team
• Recognize your professional power
References

The End

Questions