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A team process to support interprofessional care

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ABSTRACT

Health care reform recognizes the value of new care delivery models that are team-based. The Interprofessional Core Competencies (2011) speak to the importance of process-to-product through teamwork. While most often the focus of teamwork is product, to get to positive health outcomes through interprofessional teamwork, the importance of process must be acknowledged. What individuals bring to the process will influence the product. Individuals come to the work of the team influenced by many cultural perspectives- personal values, assumptions, and beliefs as well as disciplinary perspectives. Cultural layers are actively operating as teams form to provide care through interprofessional teamwork. Without self-awareness, reflection, and effective communication—the basic skill set for effective teamwork process—interaction within teams may not reach its potential. This article demonstrates one university's approach to educating their Doctor of Nursing Practice (DNP) students and guiding them to achieve teamwork competencies that are vital to intra–interprofessional practice.

Teamwork, both interprofessional and intraprofessional, is integral to the provision of high-quality, safe patient care. Teamwork training is an essential prerequisite for effective teamwork. In 1972 the Institute of Medicine (IOM) formed a steering committee to discuss the importance of interdisciplinary education and to provide recommendations at the administrative, academic, and national levels.[1] In the decades that followed the IOM's conference, despite small gains in interprofessional education, inclusion of teamwork skills had not been incorporated into curriculum in much of health care education. In 1999 the IOM drafted a second report that highlighted the number of patient deaths related to preventable medical errors. The report noted that between 44,000 and 98,000 individuals die in hospitals due to medical errors,[2] p. 26). These unintentional adverse events were found to be a leading cause of death in the United States. In the IOM report, the committee concluded that patient safety issues were based on system rather than individual error. The IOM identified that teamwork training embedded into the health care education curriculum was imperative to foster interprofessional collaboration and improve patient safety,[2] p.176). As a result of this report, there has been much

inquiry into educating health professionals how to work cohesively together, and academic institutions across the country have implemented programs to foster interprofessional collaboration. In 2011 the Interprofessional Education Collaborative Expert Panel devised a set of core competencies central to effective teamwork training.[3] The core competencies provide a foundation for all of the disciplines to build into their curriculum so that health care professionals across the industry are adhering to a uniform standard. Competencies cover team roles, guiding ethical principles, engagement, knowledge integration, leadership, conflict resolution, shared accountability, self-reflection, process improvement strategies, and the ability to perform in various team roles.[3] Much of the focus of the IOM and the health care industry in general, has been toward interprofessional training. It is recognized that a major obstacle to working together is lack of understanding of each other's roles and the culture of each discipline. At its core, teamwork commences at the intraprofessional level. Many of the fundamental components of teamwork remain the same within and across disciplines. It is important for a group to be able to work together as a first step in effectively working with others outside of the profession. This paper describes one university's intraprofessional education model, embedded into the clinical doctor of nursing program in an effort to prepare students to work together within their discipline and across the professions, with the overall goal of fostering leaders in promoting safety in health care.

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What is Teamwork?

For organizations to educate staff and students effectively, it is important to start with a definition of teamwork. Xyrichis and Ream (2007),[4] through the process of concept analysis, present a definition for teamwork in health care. The authors concluded that teamwork in health care is "A dynamic process involving two or more health professionals with complementary backgrounds and skills sharing common health goals and exercising concerted physical and mental effort in assessing, planning, or evaluating patient care".[4] Teamwork, as defined by Xyrichis and Ream, is best achieved through shared decision making, interdependent collaboration, and open communication (2007). A popular model that describes the mechanics of teamwork is the input-process-output model. Input, at the individual level, refers to a person's skills, attitudes, and personality. At the group level leadership, size, structure, and cohesiveness are important.[5] Process refers to group behaviors that ultimately impact outcomes. Process is how the team members interact with one another and includes: time spent together; strategies developed to reach goals; conflict; communication; and boundary management.[5] In order for a team to work effectively, the following competencies must be met: mutual performance; monitoring; adaptability; conflict resolution; leadership; communication; and, information exchange.[5] Outcomes are the degree to which the team was able to reach its goals. Additionally important to team output are attitudes and behavior.[6]

Teamwork and Cultural Competence

Effective teamwork, whether it be interprofessional or intraprofessional, is dependent on the input and process factors described. However, these input and process factors may be influenced and mediated by cultural assumptions, beliefs, and attitudes.

Culture is defined as "a body of learned behavior common to a given group shaping patterns of thinking, feeling and behaving".[7] All individuals bring their own culture to teamwork. Each discipline within the health care professions has its own culture. A barrier to interprofessional teamwork is lack of understanding of interdisciplinary team members' perspectives, which are shaped personally and professionally. The Interprofessional Core Competencies (2011) are designed to reduce that knowledge gap. Under the competency domain of ethics and values, the overall goal is for individuals to work together in a climate of mutual respect and shared values.[3] In the competency domain of roles and responsibilities, clinicians are called upon to use the knowledge of their role as well as those of their interdisciplinary peers to appropriately address the patient's health-care needs and values.[3] As much as each discipline has its own culture, each team member has his/her own individual culture. Team members, whether interprofessional or intraprofessional, hail from diverse backgrounds, and are influenced by gender, age, ethnicity, values, and beliefs. As outlined in the IPO Teamwork model, attitudes are an important element of team success. In order for effective collaboration and communication to occur, it is important that individuals reflect on their own attitudes as well as have an appreciation for the diversity of their peers.

A key component to a successful teamwork process is cultural competence. There are many definitions of cultural competence. At its core it is "the ability to understand and constructively relate to the uniqueness of each individual in light of the diverse cultures that influence each person's perspective" (p. 6).[8] Cultural competence is a learning process that begins with self-assessment and self-reflection. Individuals must understand their own backgrounds, beliefs, attitudes, value systems, and biases. They must realize that others come from different cultural backgrounds and

different perspectives. This initial work sets the stage for culturally competent behavior and effective teamwork processes.

The Value of the Clinical Doctorate Degree

The Value of the Clinical Nursing Doctorate Degree to address the goal of health care reform and to meet the nation's health care needs, as outlined in the 2001 IOM report, the Robert Wood Johnson Foundation and the Institute of Medicine partnered in 2008. Their task was to create a recommendation report on the vision for the future of the nursing profession to accommodate health reform. The team recognized by virtue of nursing's close interactions with patients, scientific knowledge and understanding of care across the continuum that nurses have the unique ability to partner with other health care professionals and to lead change.[9]

The committee strongly supported the need for nurses to seamlessly further their education in both clinical and research practice. They recommended that the proportion of nurses pursuing either a clinical or research doctorate degree double by the year 2020.

The American Association of Colleges of Nursing also believes that in order to afford high quality safe patient care, and to be effective leaders, nurses need to continue to advance their education. The committee outlined the key components necessary to successfully educate students through a clinical doctorate degree. These essentials included elements such as policy, leadership, scientific underpinnings and interprofessional collaboration, to name a few.[10]

Nurse faculty leaders at Pace who envisioned implementing a clinical doctorate program at Pace University shared the philosophy of the IOM and the AACN that nurses need to be prepared to act as leaders and change agents in the health care system. Curriculum development centered on ensuring that future clinical doctors of nursing be equipped with the tools to be powerful change agents who lead health care reform. A key component intertwined throughout the curriculum is teamwork. If nurse leaders are going to successfully work and lead a diverse cadre of health care professionals, teamwork skills are essential.

DNP Teamwork Guidelines Development

The Pace University College of Health Professions developed the Doctor of Nursing Practice (DNP) program in 2008. The mission of the DNP program is to prepare advanced practice nurses to provide dynamic clinical leadership through culturally competent, evidence-based practices and clinical innovations directed at improving health-care quality. The Pace University faculty leadership recognized that teamwork was important to program success and to clinical practice beyond the classroom setting. Through a quality and safety improvement process, teamwork guidelines were developed for the students and faculty. The guidelines recognize the importance of intraprofessional teamwork to interprofessional teamwork, and were expanded and adapted to include the Interprofessional Core Competencies after they were disseminated in 2011. The aim of the DNP teamwork guidelines is to facilitate the DNP students' ongoing development of their skill set in the intra-interprofessional collaboration practice competency domains. These domains include: values and ethics for inter−intraprofessional practice, roles and responsibilities, inter- and intraprofessional communication, and finally team and teamwork. The overall goal is for students to achieve leadership competency in both the process and product of intraprofessional and interprofessional teamwork. These guidelines are fluid and have changed over time based on student and faculty feedback in an effort to facilitate and enhance development of the skill set.

The program's definition for teamwork is in accordance with what has been cited in the literature and shares the belief that

teamwork requires communication, knowledge, reflection, and introspection. A common vision must be realized and realistic goals set. There needs to be mutual accountability as well as adherence to teamwork process and product. Teamwork requires a skill set that begins with self-assessment and self-reflection. Skills, attitude, and personality, as noted above, are all part of the input component of teamwork. All team members must take an inventory of their skills, define strengths and weaknesses, and assess and reflect on personality and attitudes. They must understand their perception of the concept of teamwork, the task at hand, and the individuals with whom they will be working.

Self-Assessment

Recognizing the importance of cultural competence in patient care and effective inter–intraprofessional teamwork, the Pace DNP program acknowledged this concept as a pillar of the program and embedded cultural competence into the curriculum. The processes of self-assessment and self-reflection, elements crucial to cultural competence, are threaded throughout the doctoral curriculum. The Pace DNP program's teamwork process begins with self-assessment, a key factor in developing cultural competence. Self-awareness is a process of getting to know oneself, understanding personal values, assumptions, and beliefs.[11] Team members need to recognize that a shared understanding with others must exist and that individuals have different values, assumptions, and beliefs. To assist with this assessment, the mini Meyers–Briggs and the mini Emotional Intelligence tools are utilized. The Meyers–Briggs instrument is designed to help individuals understand their personality type. Katherine Briggs and Isabel Briggs Meyers, both students of human behavior and growth and creators of this tool, made it their mission to design and develop an indicator that allowed people to better access their psychological type.[12] The Emotional Intelligence test offers individuals an opportunity to better understand the way they perceive, control, and evaluate their emotions. Students complete the assessments, self reflect and join together to share their findings. This begins the process of understanding one another across these dimensions and provides an opportunity to identify similarities and differences and tap into the beginning of cultural awareness and cultural competence.

Teamwork Charter

The next step in the teamwork guidelines is the team charter. The goal of the charter is to facilitate the team's work through communication and understanding. The document includes: a skill inventory for each member; the team's purpose; overall and specific project goals; and an analysis of potential teamwork challenges and barriers. The charter also includes ground rules for how the team will work together, and guidelines for conflict management and resolution. Team members come together to craft all of the variables in the document and begin their work with an initial understanding of each other and a clear understanding of managing the variables involved in the teamwork process.

Evaluation

At specific points team members perform assessments on themselves and their colleagues role and contributions to the team by using the "Learning Team Evaluation". Attendance, communication, preparation, participation and interpersonal relations are evaluated during this process. A faculty member attends at least two team meetings and assesses the teams' work process on the dimensions of team discussion, team role, and team interaction. This assessment addresses the ability of the team to fulfill the

elements of their team charter and interact with one another. The teamwork product is evaluated on both an individual and team level. Based on the charter, members work both individually and collectively. The individual work is posted to the electronic blackboard for the course, in the discussion section. Each contribution is meant to be a piece of what becomes the final product. The overall team product is evaluated based on criteria set out in the individual rubrics that were designed for a specific assignment.

Conflict

Conflict is recognized as a necessary part of a team's developmental process. It has been found that when managed appropriately, conflict enhances the effectiveness of teamwork.[13] In the Pace DNP teamwork charter, guidelines on how to manage and resolve disagreements, when they do occur, are identified. Team members are asked to follow two tenets when it comes to conflict. The first is to agree to disagree constructively. The second is to criticize ideas and not people. In moments when members are not able to resolve conflict, the faculty assigned to the team initiates a mediation process to assist in resolution. If the problem persists, the team and faculty request the program director's assistance.

Coaching

Successful teamwork outcomes rely on effective team–member relationships. Learning the skills of effective teamwork is transformational. It evolves in phases with a level of disorientation dilemma, followed by self assessment, and finally exploration of new roles.[14] Many of the competencies that emerge from effective teamwork are skills that can be taught and learned through coaching. The mentor works with team members through the phases of teamwork evolution. At the start of the DNP program a psychologist who specializes in cultural competence and teamwork was a consultant to the program. The consulting psychologist offered insight for faculty and students into variables that lead to successful team processes. Coaching, by a faculty member who is a certified coach, has become an important strategy used to facilitate DNP teamwork. The Inter–Intraprofessional Core Competencies guide the process of these meetings.

Teamwork and Leadership

Successful skill acquisition and competency of the DNP guideline elements fosters the ability for students to become culturally competent team leaders who grasp the significance of intra and interprofessional collaboration. As leaders, the practitioners understand the teamwork process and possess the tools to steer teams towards healthy interactions that promote positive outcomes. Influential leaders must have the capacity to organize teams for specific purposes, lead teams to set goals, monitor progress, utilize a system to achieve desired outcomes and learn from the process. Leaders reward successful performance, intellectually stimulate, inspire excellence, and address the needs of the team to improve team performance. The DNP guidelines set the foundation for students to acquire this influence.

Student Feedback

Many of the DNP students work in interdisciplinary health-care environments both during and upon completion of the program. The teamwork guidelines are a tool to assist practitioners to become leaders in the interdisciplinary settings in which they are employed. When asked how the guidelines have shaped practice, one student spoke of how working with other professions has been

a constant in her career. She described the importance of teamwork and leadership and how she, as an administrator, has been able to bring the skills she learned in the DNP program to the clinical setting in which she works as a nurse leader. Another student, also a leader in her place of employment, utilizes the Pace DNP guidelines as a foundation for program development endeavors with the multidisciplinary group whom which she works.

Implications for Practice

The IOM reports "To Err is Human" in 1999 and "Crossing the Quality Chasm," in 2001, both highlighting adverse patient events due to medical error, set the stage for studies and projects geared toward improving safety and quality in health care.[2,15] In 2007, the Institute of Healthcare Improvement, studied organizations that were recognized as high-performance delivery systems.[16] These Accountable Care Organization (ACO) pilot sites were found to promote performance through a variety of practices including team-oriented care delivery whereby health care professionals work together in the management of a patient across settings, improving both communication and care coordination.[16] As a result of the positive findings of these studies, the Department of Health and Human Services (HSS) proposed new rules for clinicians in the management of Medicare patients. The HSS calls for health care providers to form ACOs and as an incentive, through the Medicare Shared Savings Program, will reward successful ACOs.[17] Success is to be determined by meeting performance standards and lowering costs. With the government push toward care coordination and a shortage of providers, advanced practice nurses are in position to assume this role. Successful ACO leaders must have expertise in team management and foundational understanding of the interprofessional core competencies. The Pace DNP Teamwork guidelines provides clinical doctorate students with the skill set needed to become leaders in health care, leaders in care coordination, and leaders in team management. Students enter the world as clinicians who have met the intra- and interprofessional core competencies and are proficient in the management of high quality patient care practices that are evidence-based and geared toward patient safety.

Conclusion

The Lienhard School of Nursing, College of Health Professions at Pace University prepares its clinical doctor of nursing practice students to become leaders in health care, focusing our three pillars primary health care, evidence-based practice and cultural competence. The overall goal is for advanced practice nurses to become experts in the provision of high-quality, safe patient care. Inter–intraprofessional teamwork core competencies are embedded into the doctoral program so that students work toward gaining proficiency in these important skill sets as they move through each step of the doctoral program. These skill sets allow them to lead a team and take on roles such as spearheading ACOs with specialization in care coordination.

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