



INTERPROFESSIONAL COLLABORATION

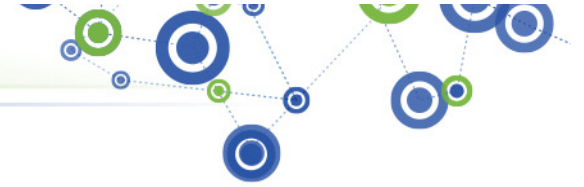
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Strategic Planning Beyond the Boardroom: Using a Collaborative Change Leadership Approach to Create an Organizational Interprofessional Education Strategy

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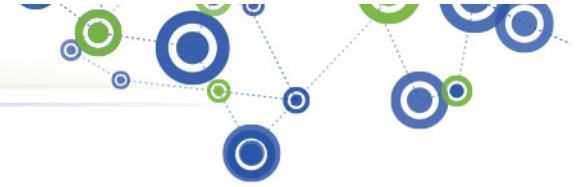
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Collaborating Across Borders V Conference
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BACKGROUND

“Interprofessional education (IPE) enables effective collaborative practice which... optimizes health-services, strengthens health systems and improves health outcomes.”

World Health Organization (2010)

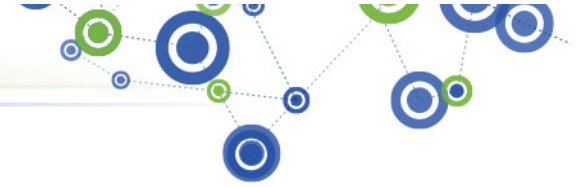




Influencer of organizational strategy:

- Emerging interprofessional collaboration strategy
 - Focused on interprofessional care with education and partnership elements





Vision

To be a system-wide leader in creating a culture of interprofessional (IP) collaboration which fosters the highest quality, person-centred care.

- ✓ Listen
- ✓ Engage the voices
- ✓ Partner across departments
- ✓ Enable and inspire collaboration



Governance Structure

IP Executive Sponsors

IP Steering Committee

IP Advisory Committee

**1. Enhancing
Organizational
Capacity**

**2. Embedding IP
Principles**

**3. Interprofessional
Models of Care**

The Foundation – Interprofessional Collaboration

1. Objectives:

1. Shared organizational awareness/understanding
2. Knowledge translation & staff/student capacity building
3. Recognition of leadership & excellence in person-centred collaborative care

2. Objectives:

1. Create IP friendly structures, processes & tools
2. Foster workforce committed to interprofessionalism
3. Align with IP *"Best Practice Matters"*

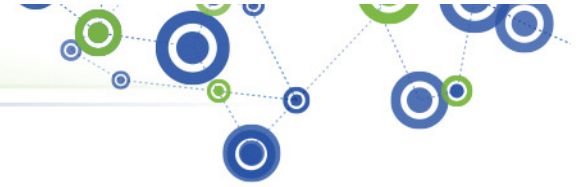
3. Objective:

1. Develop & implement enhanced models of care that are focused on patient need and based on role optimization, evidence and interprofessional collaboration

In Partnership with HR, Organizational Development & Leadership

AIM

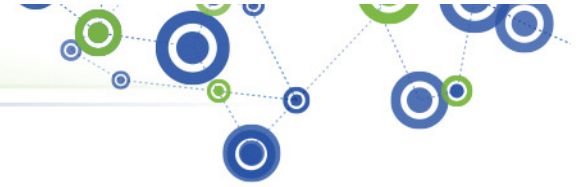
To create an IPE strategy
based on diverse input and ‘voices in the system’



Overarching Principle

Collaborative change leadership approach to strategic planning for IPE which is grounded in appreciative inquiry.





CCL Core Concepts

- **Appreciative Inquiry**
- Mindfulness
- **Sensing**
- **Emergence**
- Strengths
- Generativity
- **Collective Intelligence**
- Development Evaluation
- Self Awareness
- **Co-creating / Community Engagement**
- Possibilities
- **Social Accountability**
- **Complex Adaptive Systems**



METHODOLOGY

- A collaborative integrated change leadership process grounded in principles to:
 - foster engagement
 - shared decision making
 - co-creation
 - shares key processes, themes, objectives, measures and organizational learnings
- Three pronged discovery phase:
 - A project team of education leaders & IPE committee members were engaged in facilitating **interviews** with participants
 - A **summit** event
 - A design team met to develop the IPE strategy using a **rapid prototyping** methodology

Interviews

| Group | Group Characteristics | Number |
|-----------------------------------|---|---------------|
| Senior Leaders | Clinical Non Clinical | 8 |
| Directors | Operations Practice Based Research Interprofessional Practice Other | 10 |
| Middle Leaders | Patient Care Managers Managers Advance Practice Nurse/Clinical Educator Professional Leaders/Education Leaders | 19 |
| Clinicians | Varied Professions | 19 |
| Students | Varied Professions | 10 |
| Academic Partners | University of Toronto, Michener Institute | 9 |
| Patient | | 1 |
| TOTAL NUMBER OF INTERVIEWS | | n = 76 |



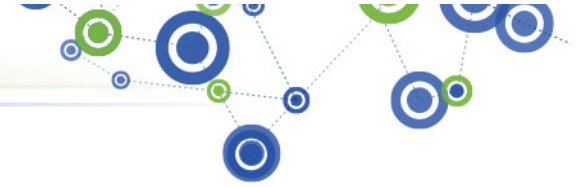
RESULTS

Phase 1: Interviews

3 primary themes:

- Building on existing strengths
- Valuing of IPE
- Linking IPE with practice



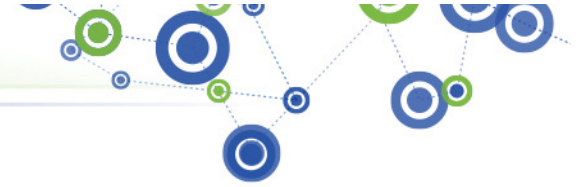


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Supporting themes

- Role clarity
- Role modeling
- Team evaluation
- Team practice
- Synergy
- Common language
- Middle leader support
- Value, respect and inclusion
- Culture change
- Person-centred care
- Physical steps





Phase 2: Summit Event

Prioritized:

- Diverse menu of learning options (8)
- Synergy – Revisit the things we are already doing (8)
- Value, Respect & Inclusion – Expand idea of the team (5)
- Common language – Have organizational definitions (5)
- Recognition– Recognize & acknowledge great IPE (4)
- Team Evaluation (3) – To help teams set learning goals (3)
- Role Clarity (2)
- Person Centered Focus (2)

Other Themes Emerging:

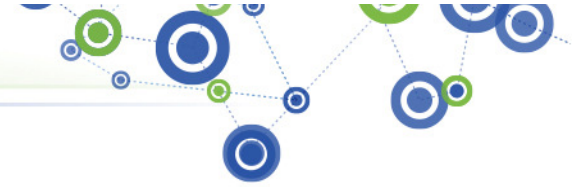
- Communication plan re IPE
- Stories/examples to illustrate ‘when it’s done well’

.....●..... Faculty Development



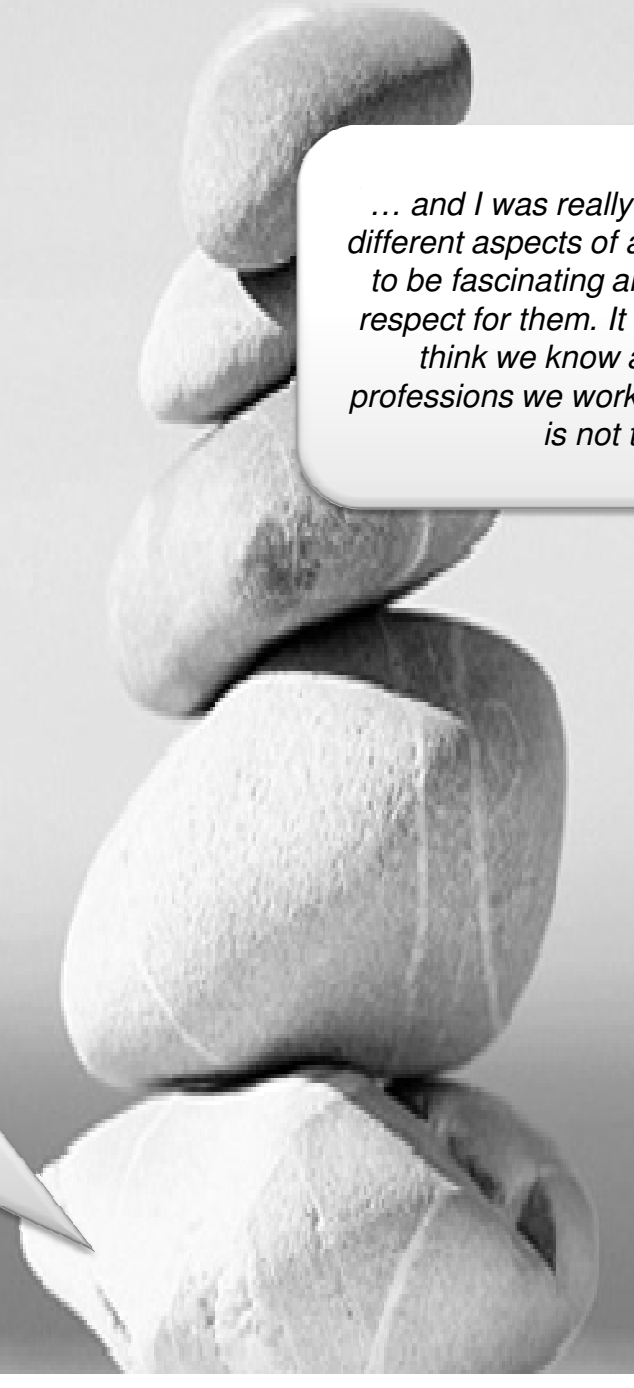
Phase 3: Rapid Prototyping

- Decision to merge strategies for interprofessional care & interprofessional education into one corporate strategy
- Addition of:
 - student IPE objectives
 - faculty development objectives
- Create corporate e-Learning module



DISCUSSION

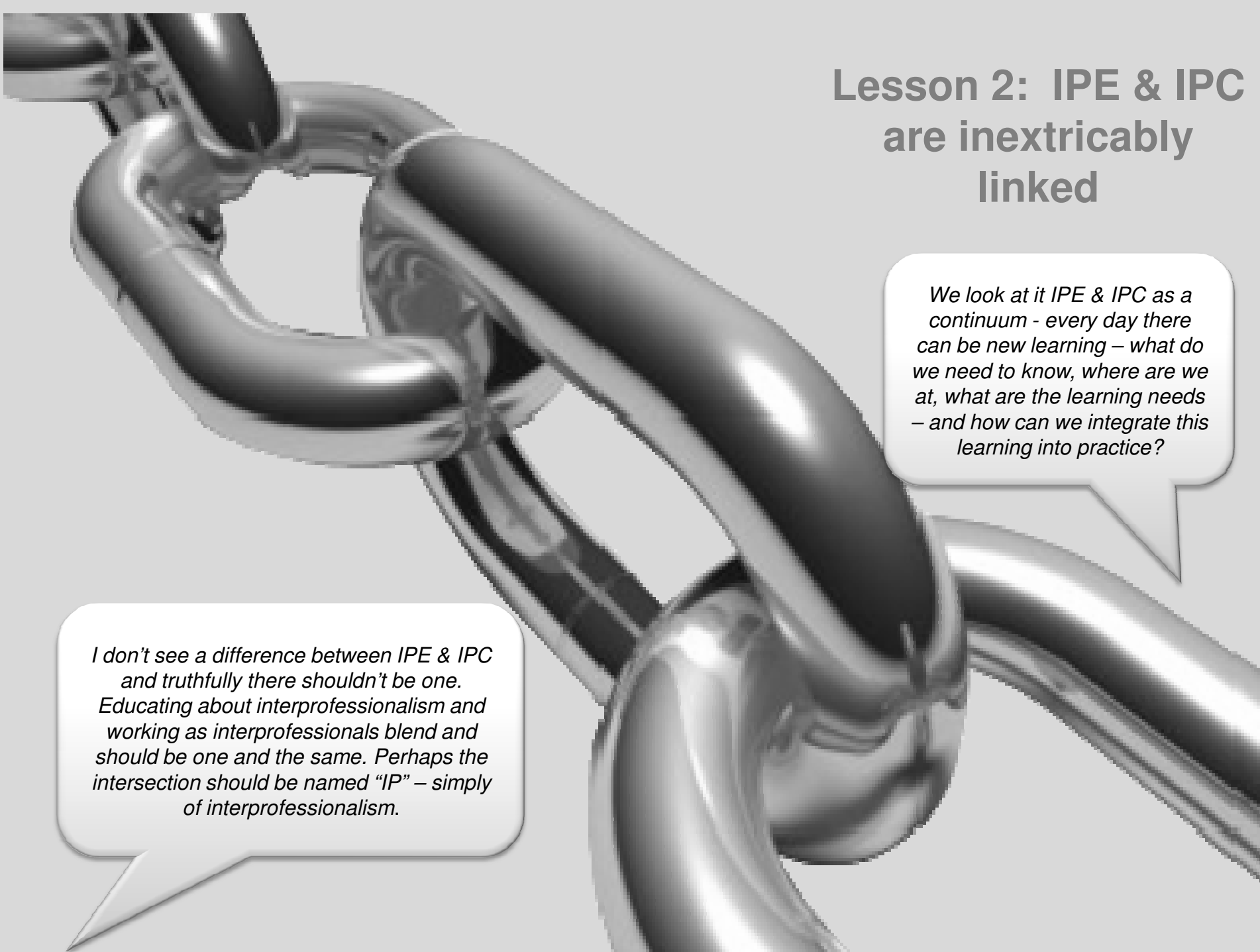




Lesson 1: IPE is important. It is valued. 'It makes a difference'

We had OTs and PTs in the same course. It was nice to learn from our colleagues. We learned a lot about each others' roles during the workshop. We didn't just learn from the speaker. It's nice now that we can go back and apply what we have learned together. Normally we just go to profession specific courses.


... and I was really surprised with all the different aspects of an SLP's role. I found it to be fascinating and it gave me greater respect for them. It is great how much we think we know about all the other professions we work with where in fact this is not the case!



Lesson 2: IPE & IPC are inextricably linked

We look at it IPE & IPC as a continuum - every day there can be new learning – what do we need to know, where are we at, what are the learning needs – and how can we integrate this learning into practice?

I don't see a difference between IPE & IPC and truthfully there shouldn't be one. Educating about interprofessionalism and working as interprofessionals blend and should be one and the same. Perhaps the intersection should be named "IP" – simply of interprofessionalism.

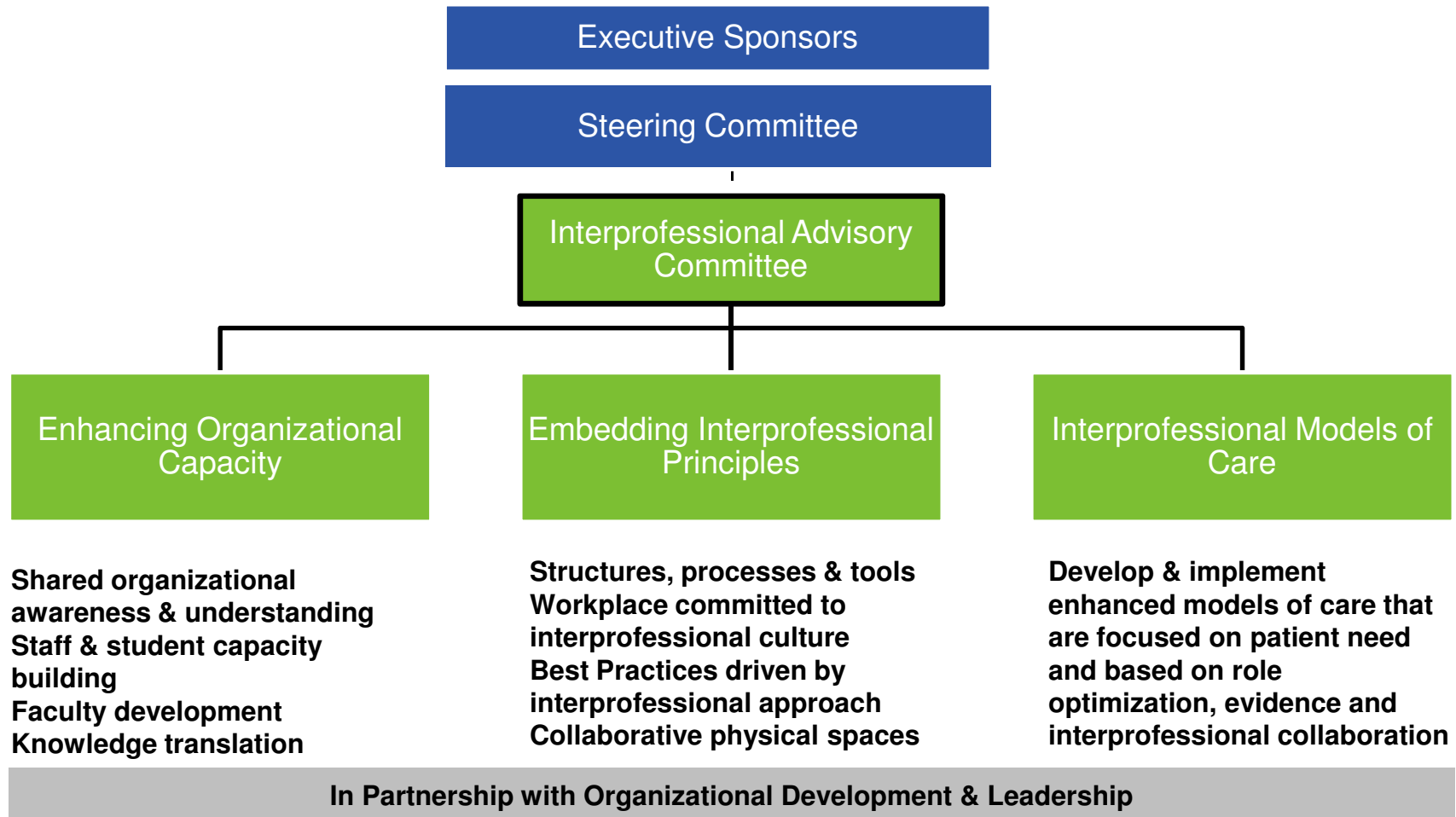


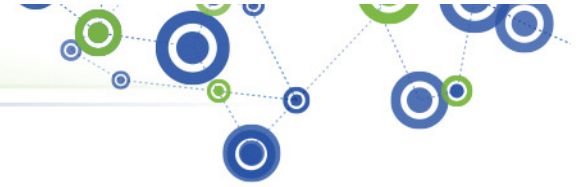
Lesson 3: We are already on the path

*I see the IP team working well together but there is always room for improvement – they can do more to learn about, from and with each other
IPE and IPC are inseparable ... think end to end and every station along the continuum*

... we are very tight interprofessional team that is fluid and understands roles and understands how we blend together...shows to patients and family we hear you as a team and together we are making a plan for you.

Corporate Interprofessional Strategy

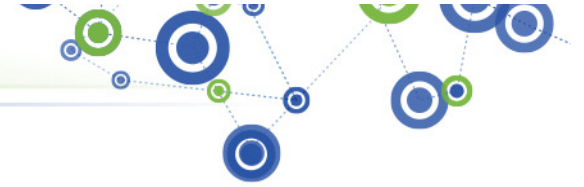




What had changed? What were we looking forward to?

- Expanded steering committee membership
- Formally merging the work of the Interprofessional Education Committee with the ongoing work of the Interprofessional Advisory Committee
- An ongoing forum to update our executive sponsors so that alignment and integration and maintained and further enhanced
- Pearls of wisdom – an approach we continue to use – Collaborative Change Leadership

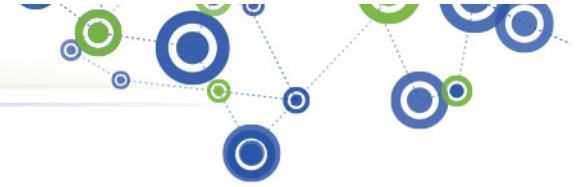




CONCLUSION

- The intentional and purposeful use of the collaborative change leadership model to develop the IPE strategy resulted in:
 - Engagement
 - Shared decision making
 - Co-creation
- In turn supporting success and participation across the organization





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Thank You!

