



 ENHANCING
INTERDISCIPLINARY
COLLABORATION IN
PRIMARY HEALTH
CARE INITIATIVE

Teamwork: E-news from the Enhancing Interdisciplinary Collaboration in Primary Health Care (EICP) Initiative

What's New?

The first two of the research papers commissioned by the Enhancing Interdisciplinary Collaboration in Primary Health Care (EICP) Initiative have been posted on the web site. Ready to be read and shared are:

- The [Individual Providers and Health Care Organizations in Canada](#) report examines the individual and organizational issues that have an impact on interdisciplinary collaboration. Not surprisingly, the report finds that personal motivation and commitment are critical to success, as is the need to honour the 'professional identify' of the various providers. Higher work satisfaction and more team effectiveness can result when status issues are set aside. Some of the operational factors that contribute to success include co-location, team training, planned and well-structured communication systems, and access to electronic health records that facilitate information-sharing.

This research suggests that providers should be exposed to systematic methods of education and teaching about interdisciplinary collaboration. They also need post-licensure training opportunities, and targeted training in communication styles, conflict resolution, teamwork processes and leadership theory.

- The [Canadian Policy Context: Interdisciplinary Collaboration in Primary Health Care](#) report identifies the principal policy issues affecting interdisciplinary practice and notes that, until recently, the complexity of promoting and implementing this approach has been vastly underestimated. It is only in the past five years that the policy, administrative and practice communities have developed a more mature understanding of the levers—interdisciplinary education, legislation and regulatory contexts, legal frameworks and funding—needed to steer change towards collaborative practice in primary health care.

A number of policy-related issues are examined, including regulatory matters such as scopes-of-practice, standards of education, core competencies and ethical frameworks, the need for legislative action, and the implications of blurred roles and boundaries for collaborating providers. The report looks at the level of interest from government and the willingness of providers to move to a collaborative model; it also

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discusses methods of resource allocation and payment structures. The report comments on the role family physicians can play in facilitating collaborative teams and the need for intermediary organizations to bridge the gaps between providers, governments and health authorities. Finally, it lays out the first stepping stones required to create a policy context that translates goodwill for collaboration into daily practice.

At this time, these two reports are available in English only, but they will soon be posted in French as well.

We apologize for this delay.

You will be notified when other EICP Research is published. Your comments and input are always welcome.

For More Information

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