

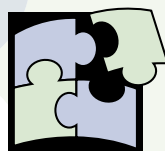
ENHANCING INTERDISCIPLINARY COLLABORATION IN PRIMARY HEALTH CARE



AMÉLIORATION DE LA COLLABORATION INTERDISCIPLINAIRE DANS LES SOINS DE SANTÉ PRIMAIRES

The Principles and Framework for Interdisciplinary Collaboration in Primary Health Care

PRIMARY HEALTH CARE
A Framework That Fits



LES SOINS DE SANTÉ PRIMAIRES
Une cadre qui réunit tous les morceaux

A C I S

Introduction

The work of the Enhancing Interdisciplinary Collaboration in Primary Health Care (EICP) Initiative is focused on how to create the conditions for health service providers everywhere in Canada to work together in the most effective and efficient way, so that they can produce the best health outcomes for their patients/clients. The Initiative, spearheaded by a Steering Committee of 10 national health care associations and a health care coalition, brings together leaders, providers and key stakeholders in Canada's primary health care system in a process designed to facilitate more interdisciplinary collaboration. This change process builds upon previous work and research that confirms the benefits of interdisciplinary collaboration to patients/clients, communities and providers in primary health care.

To support the process, a set of principles and a framework have been under development through an extensive pan-Canadian consultation and research endeavour. This work, under the direction of the Steering Committee, has been designed to create a better understanding of how the primary health care system should develop, and to identify what policies, principles and operational infrastructure are needed to support such a system. The Principles and the Framework are intended to provide a vision for interdisciplinary collaboration in primary health care and are relevant to a variety of practice settings across the country, from primary health care organizations, such as community health centres, to providers working in public and private practice.

In the context of this Initiative, the Principles are considered to be the values shared by stakeholders that are critical to establishing collaboration and teamwork to achieve the best health outcomes. The Framework builds upon these principles and is composed of the structural and process elements required to support collaborative primary health care. The elements must be present in order to sustain a health care system that maximizes the benefits of interdisciplinary collaboration. The Principles and the Framework should be viewed holistically as a system of interrelated components that clarify the vision and conditions necessary for interdisciplinary collaboration among primary health care providers.

Based on consultations, the Principles and the Framework will be finalized by the EICP Steering Committee in the spring of 2006 to guide the future of primary health care in Canada. The national associations represented on the EICP Steering Committee will be asked to endorse both the principles and the framework as a way of demonstrating their commitment to better collaboration in primary health care. The Principles and the Framework will serve as a workable blueprint for providers, the public, governments, educators and regulators—leading them to a future where it is more common to find collaboration among health professions.

This document is intended to provide a distilled outline of the EICP Steering Committee's consensus view of the academic writing and research on the subject of interdisciplinary collaboration and of the input gathered from a consultation process. The process included:

- Steering Committee deliberations;
- Small group consultations (public, providers, government officials);
- Regional workshops (providers, experts, government officials);
- Analysis of workbooks completed by providers and policy-makers;
- The Leaders' Forum (providers, experts, government officials);
- Five Barrier/Enabling Task Force Groups (providers, experts, government officials);
- Five full research reports;

- Consultations with professional associations' memberships; and
- Web based consultations and surveys.

The document does not include detailed references and annotations.

What Is Primary Health Care?

A primary healthcare (PHC) system involves health professionals *working together* within the broader determinants of health. A PHC system co-ordinates and integrates services to respond to the health status of the population. It includes illness prevention, health promotion, diagnosis and management of health concerns. It encourages the use of the provider(s) from the most appropriate health discipline(s) to maximize the potential of all health resources (adapted from Marriot and Mable, 2002). It is the first level of contact for individuals, the family and the community with the health system, bringing health care as close as possible to where people live and work. To be effective, a PHC system is integrated with the services offered in secondary and tertiary care.

The range and complexity of factors that influence health and well-being as well as disease and illness require providers from diverse health professions to work together in a comprehensive manner. For example, individuals need health information, diagnosis of health problems, support for behavioral change, immunization, screening for disease prevention and monitoring of management plans for chronic health problems. Working together, the combined knowledge and skills of health professionals become a powerful mechanism to enhance the health of the population served.

Working together can take various forms. At the simplest level, providers consult with each other about the services needed by an individual or family. In more complex situations, providers work more closely, identifying (together with the individual and family) what services are needed, who will provide them and what adjustments need to be made to the health management plan. The number and type of service providers depend on the nature of the health issue and the availability of resources. This is a dynamic process that responds to changing needs. Services can be provided in a variety of settings.

Providers in a PHC system will continue to aspire to provide the highest quality health services for Canadians. High quality depends on a shared vision and values, as well as on having in place the infrastructure to effectively support programs and services.

Principles

The Principles of interdisciplinary collaboration in primary health care reflect shared values that create a foundation for effective and efficient decisions about policies, programs and services. The following six principles reflect the consensus opinion of the EICP Steering Committee and are based on research literature as well as on the opinions of providers in primary health care, health professional organizations and the public:

1. Patient/Client-centred

The individual (and family) is the focus of primary healthcare services. Services are tailored to individual needs. Health professionals work together to optimize the health and wellness of the individual. Health professionals involve the individual in decision-making and respect informed decisions. The individual is actively engaged in the prevention, promotion and management of health problems. Privacy and confidentiality of the individual is respected.

2. Population Health Approach

A population health approach is a consistent and rational way to set priorities, establish strategies and make investments in action to improve the health of the population. Providers, planners and leaders assess the needs and health problems present in a community and involve the community served in both the identification of and the response to health needs. A community's needs are addressed across the continuum of care, including health promotion and prevention, treatment, referral, therapy, supportive care and palliation. Programs and services are tailored to address the determinants that influence the health of the individuals and families to whom care is provided. Services are then evaluated to assess their impact on the population.

3. Quality

The continuity and coordination of care and service, with a focus on the patient/client, is promoted. Providers from various disciplines work together to ensure delivery of the best care possible. Providers use the results of research and evidence as a basis for decisions about the treatment and management of health problems. Services are continuously evaluated to measure health outcomes and track performance. The results of the evaluations are used to improve care and service.

4. Access

The individual (and family) has access to the “right service, provided at the right time, in the right place and by the right provider.” Geographic barriers are minimized; services are available where people live, work and/or learn. Equity of access that considers and respects age, income, gender, culture, language, religion and lifestyle of the individual is assured.

5. Trust and Respect

Each profession brings its own set of knowledge and skills—the result of education, training and experience—to collaborative primary health care. A collegial environment that supports shared decision-making, creativity and innovation facilitates access to appropriate health services. The health of the individual (and family) can benefit from the distinct contributions of various professionals. Providers learn from each other and practise in a flexible way to best meet individual and family needs.

6. Communication

Providers are equally skilled in active listening and effective conversation with the individual (and family) and with other members of the interdisciplinary team.

Framework

The EICP Framework is built upon those foundational principles. The Framework describes the characteristics of a systemic approach to primary health care and the elements needed to support the operation of such a system. The following 7 key framework elements are required to sustain interdisciplinary collaboration in primary health care.

- Health human resources;
- Funding;
- Liability;
- Regulation;
- Electronic health records;
- Management and leadership; and
- Planning and evaluation.

These elements do not stand alone—they are interrelated and should be considered as a whole.

Health Human Resources

The availability and distribution of human resources are at the core of the shift to interdisciplinary collaboration in primary health care. Interdisciplinary collaboration will result in maximizing the skill sets and scopes of practice of all professionals for the benefit of the individual (and family). Research on supply and demand, productivity, as well as demographics of human resources in the health sector will provide the basis for planning.

Progressive recruitment and retention activities such as providing a healthy workplace, enhancing the professional satisfaction of each health provider, and offering a suitable work–life balance will ensure the health human resource requirements in PHC are met. Interdisciplinary collaboration will help address the work–life balance issues experienced by many providers and improve the quality of service delivered to patients/clients. Within this interdisciplinary environment, professionals will be supported in developing their competencies to align with population needs.

Effective teams function best when there are clearly articulated roles and responsibilities for each health professional on the team. Professionals will gain the necessary understanding of how to work together through integrated interdisciplinary education programs and through continuing education in areas such as team building, communication, conflict resolution, and the use of information technology (including electronic health records).

Funding

Innovative funding models have the potential to create a positive incentive for providers who are considering interdisciplinary collaboration. Payment methods for providers (fee-for-service, salary, capitation or various blended mechanisms) must facilitate and promote interdisciplinary collaboration. The provision of health services (whether public or private) as well as payment for services (user-pay, tax-based, or co-pay) must respect the principles of interdisciplinary collaboration.

Liability

Liability is a concern for all providers and this is even more true when they are asked to work in a collaborative setting. Two directions are needed: an integrated approach to liability insurance that links the various systems now in place and recognizes shared decision-making in ways that are consistent with patient safety and risk management; and clear legislated scopes of practice issues for providers and for collaborative practices.

An insurance system that supports an interdisciplinary collaborative approach will allow team members to give their full attention to the care of the patient/client. To support informed legal decisions related to liability, an education program is recommended for those working in the judicial and legal system about collaborative practice.

Regulatory

In the transition to interdisciplinary care and service, what is key is support from regulatory colleges to continually review their policies to include an interdisciplinary approach. In addition, legislated requirements are needed to give regulators of various professional disciplines the ability to work together.

Electronic Health Records

Sharing information among team members is considered critical to improving continuity of care and service delivery. Continuity of information across providers is related to improved quality of care and improved administrative processes. Privacy and confidentiality issues are a concern to client and provider alike. In addition, interoperability is critical to an EHR that is being used by a team of providers who collaborate in the care of individuals and families. Change management in the uptake of technology is especially pertinent and is closely linked to health human resource concerns for education and training. Appropriate resources are needed to support the team communication that an EHR makes possible. Other technology, such as e-mail, can provide effective support for working with others in a collaborative practice. Technology like tele-health can make it easier for providers to collaborate and improve access to services for individuals and communities.

Management and Leadership

Leaders should be committed to a vision for collaborative primary health care. Existing models can be examined for best practices in areas such as workplace health, job satisfaction and retention and recruitment. Skills development for managers in areas such as communication, teamwork and leadership is critical to the successful operation of interdisciplinary teams. Strong administrative support, coupled with appropriate governance structures, are necessary. The time and resources needed to collaborate must be accounted for.

Planning and Evaluation

Strong centralized administrative support is required for the planning and evaluation of primary health care and must include relevant information systems. Effective planning must be based on the characteristics and needs of the population served and support interdisciplinary collaborative care and service models. Evaluation frameworks and assessment tools to measure the performance of interdisciplinary collaborative practices and primary health care are being developed. The use of these frameworks and tools must be encouraged in evaluating teams and organizational outcomes, and should include benchmarks for quality improvement.

Principles and Framework—Next Steps

The Principles and the Framework developed in this second approximation are based on input to date from primary health care providers, decision-makers and the public. They are also based on literature reviews and commissioned research—research that affirms the Steering Committees' conviction that collaboration leads the way to better outcomes for individuals and their families. The Steering Committee has reflected on this input and collectively presents the material in this document for consideration by its association memberships. The endorsement of these principles and framework by the associations will undoubtedly accelerate the adoption and practice of interdisciplinary collaboration in primary health care across Canada. The future work of the Steering Committee will involve the development of a toolkit, including targeted recommendations for advancing interdisciplinary collaboration in primary health care.



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- Canadian Nurses Association
- Canadian Pharmacists Association
- Canadian Physiotherapy Association
- Canadian Psychological Association
- Canadian Coalition on Enhancing Preventative Practices of Health Professionals
- Dietitians of Canada
- The College of Family Physicians of Canada