

An exploratory cross-sectional study of interprofessional collaboration within community specialist care teams integrating care for older people



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Background

- The National Clinical Programme for Older People (NCPOP) in Ireland is designed to support older • people to live well in their homes by advancing primary and secondary care services. The programme promotes integrated intermediate care through interprofessional community specialist teams.
- The Co-Designed ECLECTIC Framework describes the core competencies for interprofessional • collaboration in integrated care of older people and provides a step-by-step guide with resources for teams to develop the necessary knowledge, skills and behaviours to demonstrate proficiency (O'Donnell et al., 2021).
- This project aimed to describe how the community specialist teams for older people in Ireland have • adopted the internal team processes and systems as well as the values and beliefs described in the ECLECTIC Framework as supporting interprofessional collaboration.
- Furthermore, we measured some factors which are thought to be associated with interprofessional • working including: psychological safety (Edmondson, 1999), work engagement (Schaufeli et al., 2006) and trust (Costa & Anderson, 2011).

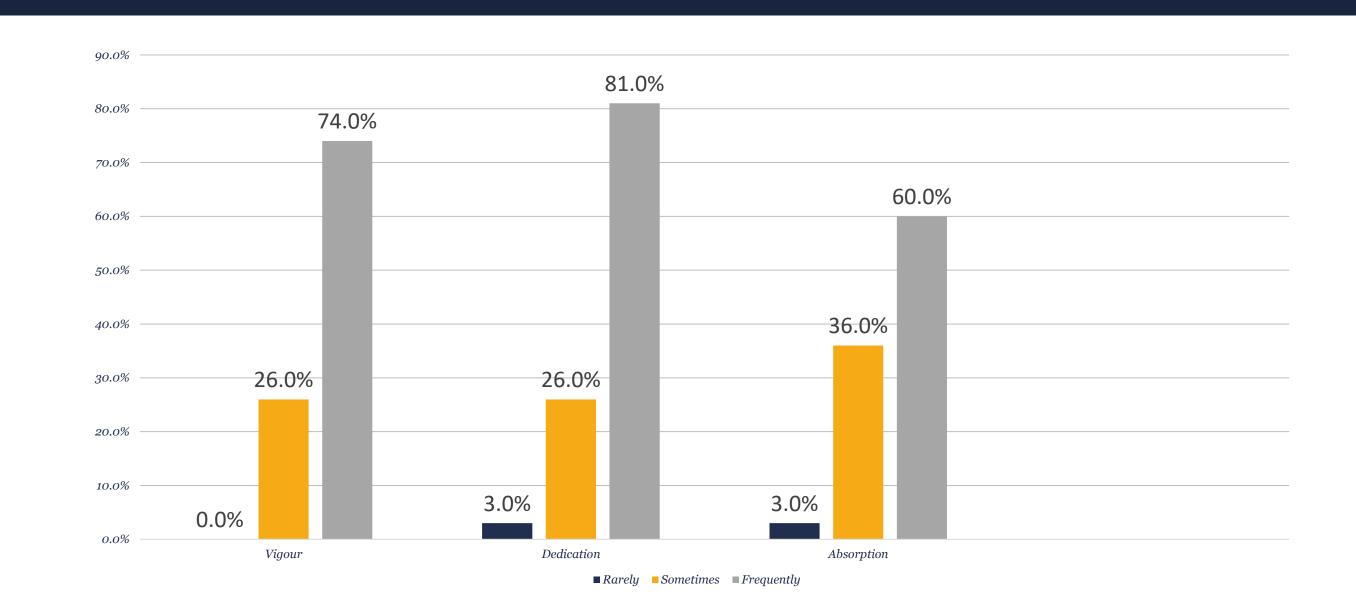


- A cross-sectional survey of all members of the community specialist teams for older people (N=30). This included administrative support staff, operational leads, clinical leads as well as healthcare professionals
- There have been 65 responses to date (the survey remains open). 60% of respondents noted they are working in a community specialist team that is operational for less than one year.
- In addition to the survey, a focus group meeting was held with 11 operational team leads representing • community specialist teams from 7 Community Health Organisations.
- The focus group explored barriers and enablers for interprofessional working in the newly developed community specialist teams.

KEY FINDINGS



- There was evidence of high levels of work engagement among the survey respondents. The respondent mean score for overall work engagement was 5.7 (min=1, max=7). Over 70% of respondents indicated that they experienced feelings of vigour in their work frequently (once a week, a few times a week or everyday). Over 81% of respondents frequently experienced a sense of dedication to their work and 60% indicated feeling absorbed in their work frequently. This corresponded with 78% of respondents experiencing psychological safety, 91% agreeing that the teams they worked for demonstrated cooperative behaviours and 86% perceiving high levels of trustworthiness in their teams.
- The positive experiences reported by survey respondents of working inter-professionally in their community specialist teams were supported by our focus group interviews with operational leads. They described highly motivated team members who were enabled to build trust, co-design team goals and visions as well as developing innovative interprofessional team resources.
- However, community specialist teams integrating care for older people in Ireland require support and time to embed their new ways of working into the culture and organisation of community healthcare. Structural investment should continue to build the necessary infrastructure to support the development of these teams.



Percentage Distribution of Respondents for Work Engagement Measured Across Three Factors: Vigour, Dedication and Absorption

Values and Beliefs Supporting **Collaboration in the Team**

- Respondents were asked to rate their agreement, on a scale of 1-5 (strongly disagree to strongly agree) on 10 items assessing the knowledge, values and beliefs that may support interprofessional collaboration.
- There was very high agreement with 8 of the ten items (>90%)
- 83% of respondents agreed or strongly agreed that those with the most relevant professional competence for an issue are recognised as best placed to lead on care planning and decision-making for that issue. Similarly, 81% agreed or strongly agreed that their input was typically sought in team decision-making.

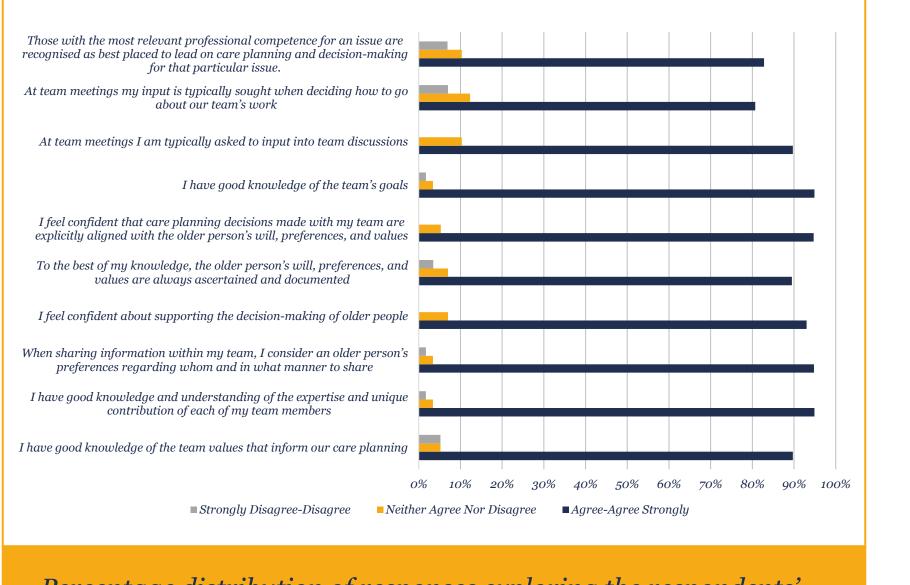
Internal Team Processes and Systems For Interprofessional Collaboration

- Respondents were asked to rate their agreement, on a scale of 1-5 (strongly disagree to strongly agree) on 9 items assessing the internal team processes or systems that may support interprofessional collaboration.
- There was very high agreement (>90%) with items measuring regular scheduling and attendance of team meetings and consistent use of the older person's preferred method of communication when care planning with them.
- There was high agreement (>80%) with items measuring regular use of a shared patient file to record information, having good knowledge of the team's communication strategy and inputting into the development of the team goals. • Three items were identified as having good levels agreement (47%-67%) which may be areas for further development across the community specialist teams. These included identifying a key worker or case manager for any giving case, communicating to the older person who their key worker or case manager is and offering a documented care plan to every older persons.

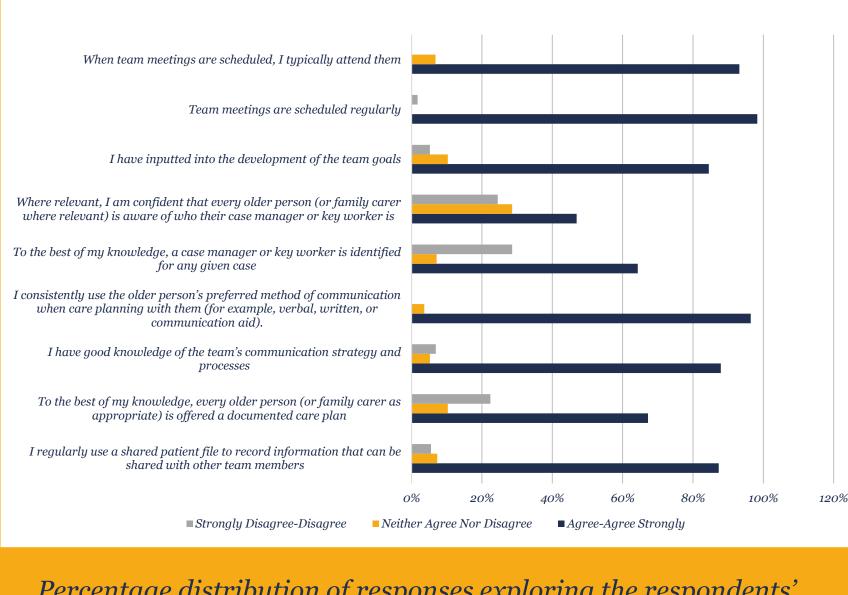
Psychological Safety and Trust Enabling Collaborative Behaviours

- 78% of respondents indicated that they somewhat agree, agree or agree strongly that there is a culture of psychological safety in the teams they are working with.
- There was a high level of propensity to trust among the team with 87% indicating they somewhat agree, agree or agree strongly that they have a propensity to trust.
- 86% of respondents indicating that they agree, somewhat agree or agree strongly that they perceive their team members as trustworthy.

• This supports the focus group findings that new ways of working in relation to distributing leadership in the teams is developing well and requires time to be fully embedded.

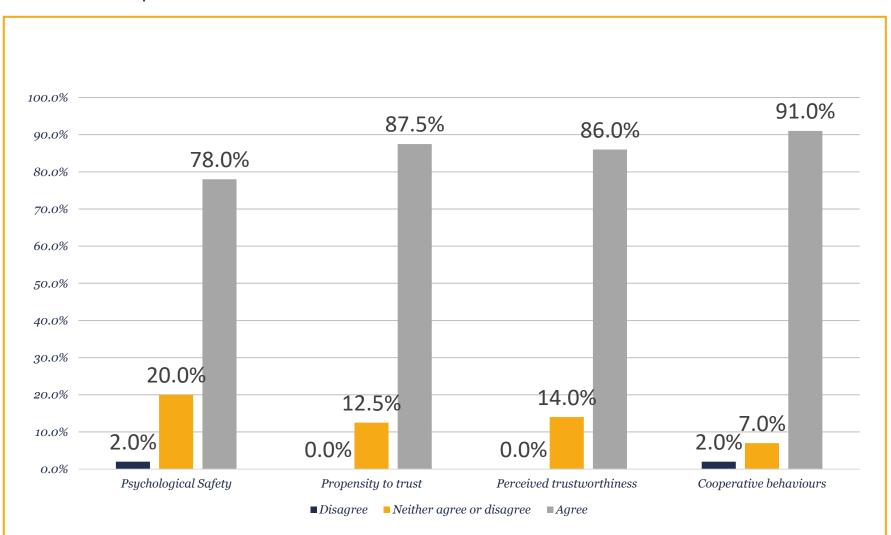


Percentage distribution of responses exploring the respondents' perception of team values and beliefs



Percentage distribution of responses exploring the respondents' perception of internal team processes and systems

• The high propensity to trust and perception of team trustworthiness corresponds to the high levels of cooperative team behaviours identified by the respondents. 91% of the respondents somewhat agree, agree or strongly agree that their team demonstrates cooperative behaviours such as taking the opinions of others into account, being open to advice and openly discussing issues or problems.

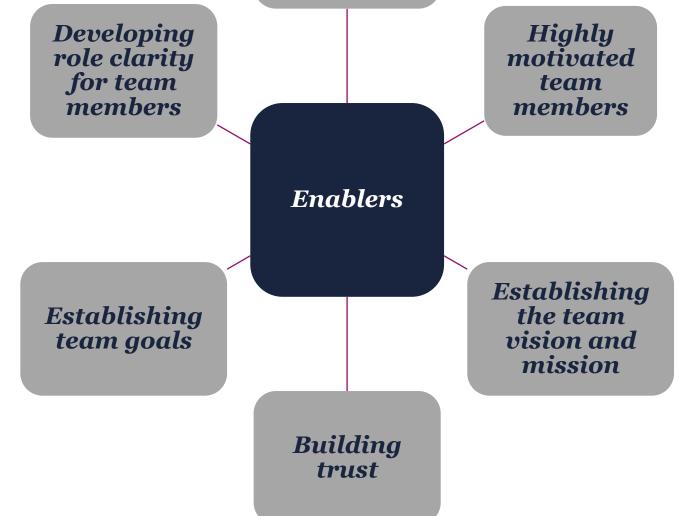


Percentage distribution of responses indicating high levels of psychological safety, propensity to trust, perceived trustworthiness of their team and cooperative team behaviours

Understanding Barriers and Enablers of Collaboration: Operational Lead Perspectives from Focus Group









- They also described the need for **critical infrastructural investment** to support emerging teams.
- Operational leads described the **highly motivated team members** recruited to the community specialist teams. This corresponds to the high levels of work engagement identified in the survey.
- Establishing trust, role clarity and team vision, mission and goals were identified as critical to supporting interprofessional collaboration.
- Collaborative **co-design of standardised documents and tools** was noted an important mechanism for building interprofessional collaboration. For example a co-designed interprofessional screening tool for triaging referrals was described.
- **Three important resources** recognised by the group as supporting team development were
 - The ECLECTIC Step-By-Step Guide to Developing Core Competencies for Interprofessional Collaboration in Integrated Care for Older Persons (with UCD Co-Lead Resources)
 - HSE Practice Guidance for Older Person Multi-Disciplinary Teams
 - 10-Step Integrated Care Framework for Older Persons 3.

References



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Scan the QR code to download the ECLECTIC Step-by-Step Guide to Developing Core Competencies for Interprofessional Collaboration in Integrated Care for Older Persons