# Interprofessional Teamwork in Patient Care

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Teamwork is vital in patient care. It directly affects outcomes and influences the experience of both the patient and providers during care. In many settings, a specific type of team called an interprofessional healthcare team is used. These teams are made up of members from varying professions, and include the patient as one of the most valuable team members. The patient's experience, goals, and expertise help drive these healthcare teams. These types of healthcare teams have distinct benefits, including providing improved care at lower costs. But while interprofessional healthcare teams offer important benefits, they also pose specific challenges. One of the most challenging obstacles to overcome is effective and honest communication between team members. This challenge can be mitigated by openly setting expectations between team members early in the patient care process. By including patients in interprofessional healthcare teams, patients and staff alike experience positive outcomes.

This paper discusses the composition of interprofessional healthcare teams as well as the benefits and challenges encountered through their use. Suggestions are made for overcoming challenges related to communication. Finally, an example is presented of a setting in which interprofessional healthcare teams are used effectively to benefit the patient, providers, and the healthcare system.

## **Interprofessional Healthcare Teams**

Interprofessional healthcare teams are made up of individuals from multiple disciplines, all working together for the benefit of the patient. This allows for varying perspectives and expertise to contribute to the patient's care and outcome. Laskowski-Jones (2015) highlights the importance of collaboration among team members, stating that successful collaboration can be equated with "getting everyone on board a boat to row in the same direction – and actually enjoy

the experience" (p. 6). As evidenced by this analogy, teamwork is comprised of more than simply working toward a common goal. Rather, it requires the ability to work well with other members toward the goal, resolving problems and concerns along the way. It also requires acknowledging the strengths and weaknesses of each team member so that expertise can be appropriately applied. As such, according to Wynia, Von Kohorn, and Mitchell (2012), a vital member of the healthcare team is the patient. They state that patients are "the reason the team exists and the drivers of all that happens" (Wynia, Von Kohorn, & Mitchell, 2012, p. 1327). This concept highlights the importance of recognizing patients' expertise in their own health and care as indispensable to the treatment plan.

For any team to function well, several components must be present. According to Salas, Sims, and Burke (2005), there are five vital components to well-functioning teams, termed the Big Five. In addition, Wynia, Von Kohorn, and Mitchell (2012) describe several values and principles that must be present in high-functioning healthcare teams. These concepts are described below.

## **Teamwork's Big Five**

In describing the Big Five of teamwork, Salas, Sims, and Burke (2005) list "leadership, mutual performance monitoring, backup behavior, adaptability, and team orientation" as the important aspects of well-functioning teams (as cited in McComb & Hebdon, 2013, pp. 669-670). Each of these dimensions allows the team to work together collaboratively to reach its intended goals. Leadership facilitates the effectiveness of teams by providing clear expectations and lines of communication, all while ensuring accountability and collaboration. Mutual performance monitoring, "monitor[ing] each other's work to avoid or detect mistakes," allows team members to assist each other through recognition of areas that need further attention

(McComb & Hebdon, 2013, p. 690). Mutual performance monitoring also promotes backup behavior, actions that support a team member and assist them in completing their required tasks "when the workload is not evenly distributed within the team" (McComb & Hebdon, 2013, p. 690). These behaviors highlight adaptability and team orientation by encouraging teamwork and on-the-fly modifications to behaviors and expectations. Together, the Big Five of teamwork ensure the team's success and cohesiveness.

## **Values and Principles of High-functioning Healthcare Teams**

According to Wynia, Von Kohorn, and Mitchell (2012), high-functioning healthcare teams must encompass several shared values and principles: honesty, discipline, creativity, humility, curiosity, clear roles, mutual trust, effective communication, shared goals, and measurable processes and outcomes. The presence of each of these values and principles ensures the ability of the team to work together collaboratively to ensure achievement of predetermined goals. Absence of one or more value or principle leads to the likelihood that the healthcare team will no longer function effectively and increases the probability of failure to achieve the team's goals.

#### **Benefits of Interprofessional Healthcare Teams**

Interprofessional healthcare teams have important benefits over other forms of healthcare teams. These include the ability of the team to profit from varying areas of expertise and experience as well as training and education. Such variation allows teams to more effectively problem-solve, enhancing the chance of successful obstacle resolution. In addition, the varying experience and education of interprofessional team members increases the likelihood that problems and concerns will be recognized and rectified long before issues escalate to life-threatening consequences (Diane, Davidson, Odegard, Maki, & Tomkowiak, 2011). All these

outcomes increase the ability of healthcare teams to provide high quality care, and decrease the incidence of adverse events. These factors combine to help decrease the cost of healthcare for patients as well as institutions and societies (Wynia, Von Kohorn, & Mitchell, 2012).

# **Overcoming Challenges of Interprofessional Healthcare Teams**

While interprofessional healthcare teams demonstrate distinct advantages over other types of healthcare teams, they also pose challenges. After considering the Big Five of teamwork and the values and principles of high-functioning teams, it becomes clear that many pitfalls can impede the effectiveness of interprofessional healthcare teams. McComb and Hebdon (2013) list "lack of communication" as a significant challenge for healthcare teams (p. 672). In addition, including patients as members of the healthcare team can pose significant difficulty when it comes to implementing the values and principles of effective and honest communication. When mistakes are made, healthcare professionals may be wary of informing patients. The high rate of litigation in the United States may make professionals shy away from admitting mistakes to patients, especially if the negative outcome was significant as in the case of death or permanent disability. However, effective teamwork can only take place when communication is open and honest. Therefore, it is imperative that all members of the healthcare team have respect for one another and agree upon a clear method for discussion of and resolution of problems.

Honest and frequent communication is vital to successful achievement of the team's goals. This communication should take place in the presence of the patient, who is an indispensable member of the healthcare team. One of the best ways to achieve effective and honest communication is to lay out clear expectations at the team's formation. These expectations must include the understanding that each member (including the patient) is human and therefore subject to human error. Recognition of the reality of making errors provides team

members room to admit their mistakes, take responsibility, and accept help to rectify the situation. A frank discussion with patients at the beginning of care regarding expectations and methods for problem solving ensures trust and accountability are expected and extended by all members of the healthcare team.

#### **Example of Interprofessional Teamwork in Direct Patient Care**

Interprofessional teams exist in many healthcare arenas. One place where they are particularly effective is in inpatient rehabilitation facilities (IRFs), where patients spend days to weeks after acute hospitalization receiving intense rehabilitation services. These services are provided by a variety of professionals, some of which include doctors, nurses, and nursing assistants; physical, occupational, recreational, and speech therapists; and dieticians and dietary staff. According to O'Brien and Ying (2016), IRFs best meet the needs of patients in the United States recovering from stroke "because of the presence of an interdisciplinary team" (p. 1382). These patients have experienced significant functional losses resulting from a stroke. They frequently require consistent monitoring, medication administration, and care by doctors and nurses even after being discharged from the acute hospital setting. While such care could be provided through outpatient visits or in a skilled nursing facility, better outcomes are observed when patients are cared for in IRFs (O'Brien & Ying, 2016).

IRFs offer patients the benefit of interprofessional teams whose members have experience working together in the care of stroke patients. Each member of the team brings specific training and expertise to the patient care experience. Training provided by therapists to nurses and nursing assistants regarding movement and transfer methods helps patients reinforce strategies taught by their occupational, recreational, and physical therapists. Dieticians and dietary staff collaborate with speech therapists to ensure patients' daily meals, snacks, and drinks

conform to their swallowing capacities. Speech therapists communicate swallowing and oral care needs to nurses and nursing assistants who are then able to reinforce these behaviors during daily cares, medication administration, and meals. Doctors rely on the recommendations of therapists and nurses for progression of patient medications and therapies, while nursing staff and therapists rely on doctors to write appropriate medication and therapy orders. Most importantly, the entire team depends on the participation and involvement of the patient. In these ways, the whole team works together for the benefit of the patient in every aspect of care and daily life.

Although all members of the team are regularly present at an IRF, not every patient interaction involves each team member. Because of this, communication between team members is especially important to successful outcomes. Patient medical charts and whiteboards in rooms offer channels for communication between disciplines. In addition, the presence of all healthcare team members at the same physical location allows for easier contact via phone or in-person should the need arise during the day. Each team member is aware of their own abilities and responsibilities, and can call on other team members when support or clarification is required. And most importantly, patients interact with each team member over the course of their day and receive consistent reinforcement and feedback regarding their progress. The presence and use of interprofessional healthcare teams at IRFs make them an ideal place for stroke patients to progress through the process of recovery.

#### Conclusion

Clearly, interprofessional healthcare teams offer unique advantages to patients. Benefits that arise from their use include the expertise and education of multiple individuals from varied disciplines, as well as a decrease in healthcare costs due to more streamlined and focused patient care. To allow for optimal functioning, effective and honest communication between all

only to patients but also to healthcare professionals and society in general.

members – including the patient – of the interprofessional healthcare team must be present. This is best achieved by consistent and early setting of expectations and responsibilities, followed up with continual reevaluation throughout the recovery process. IRFs are an important area where interprofessional healthcare teams make a vast difference in the outcomes of patients.

Interprofessional healthcare teams in any setting, when properly implemented, are of benefit not

#### References

- Diane R., B., Davidson, R. A., Odegard, P. S., Maki, I. V., & Tomkowiak, J. (2011).

  Interprofessional collaboration: three best practice models of interprofessional education.

  Medical Education Online, 16(1), 1-10. doi: 10.3402/meo.v16i0.6035
- Laskowski-Jones, L. (2015). Making the case for collaboration. *Nursing*, *45*(11), 6. doi: 10.1097/01.NURSE.0000472520.09610.04
- McComb, S., & Hebdon, M. (2013). Enhancing patient outcomes in healthcare systems through multidisciplinary teamwork. *Clinical Journal Of Oncology Nursing*, *17*(6), 669-672. doi: 10.1188/13.CJON.669-670
- O'Brien, S. R., & Ying, X. (2016). Inpatient rehabilitation outcomes in patients with stroke aged 85 years or older. *Physical Therapy*, 96(9), 1381-1388. doi: 10.2522/ptj.20150364
- Salas, E., Sims, D.E., & Burke, C.S. (2005). Is there a "Big Five" in teamwork? *Small Group Research*, 36, 599–605.
- Wynia, M. K., Von Kohorn, I., & Mitchell, P. H. (2012). Challenges at the intersection of teambased and patient-centered health care: Insights from an IOM working group. *JAMA: Journal Of The American Medical Association*, 308(13), 1327-1328.