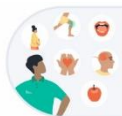


Recommendations for interprofessional collaboration in primary care

For interprofessional collaboration (IPC) to take place successfully in daily practice, it is necessary for all members of the primary care team to actively and continuously invest in its implementation and development. This brings added value to the team and to the continuity of care for patients. Interprofessional collaboration is an ongoing process that must be actively managed and involves interaction between team members. The following 10 practical recommendations provide a framework for this. They are aimed at the entire team in primary health care units (PHCU) as well as other multi-professional facilities involved in primary care.

-  1. Learn from one another and be aware of team members' competencies and roles
-  2. Contribute to teamwork with a positive attitude and foster egalitarian relationships
-  3. Develop communication strategies
-  4. Hold regular team meetings and case discussions
-  5. Create and use spaces for IPC
-  6. Provide regular information and training on IPC
-  7. Rethink hierarchical structures and maximize the scope of practice and decision making of individual health and social professions
-  8. Implement structured onboarding with mentoring
-  9. Familiarize everybody with success factors and barriers for IPC
-  10. Develop a shared team vision



1. Learn from one another and be aware of team members' competencies and roles

By creating suitable opportunities, team members should be encouraged to learn from other professions or disciplines in the team and to be aware of everybody's competencies, roles, and responsibilities.

Tips from professionals:

- » **“Shadowing”**: New employees and trainees spend a couple of hours or a day with members of other professional groups. They accompany them in their daily work to learn about their routines, main areas of work, and internal processes.
- » **Introduction round**: Employees present their fields of activity and main areas of work to their colleagues, e.g., as part of a team meeting. In particular, new colleagues should be given the opportunity to introduce themselves and their focus areas. This allows the team to jointly consider how future collaboration can be optimally designed. It may also be useful for a team to get to know each other even before a Primary Health Care Unit (PHCU) opens.
- » **Tools provided by the Austrian Primary Health Care Platform**: The [Austrian Primary Health Care Platform](#) provides professional group factsheets for team information. They include [professional and competence profiles](#) for the health and social professions that frequently work in a PHCU. In addition, videos on the fields of activity of individual professional groups are provided in its media library.



2. Contribute to teamwork with a positive attitude and foster egalitarian relationships

Every team member can contribute to successful IPC with a **positive attitude towards teamwork** and should also ensure that all team members feel **valued and respected** in the work environment regardless of their profession or experience. Acknowledging and respecting each other can also mean, for example, not only considering the needs of the patient within one's own field of expertise but also choosing a collaborative approach and thinking across professional boundaries. In order to do so, it is necessary to know one's **own professional boundaries** and **overlaps with other professions**.

Tips from professionals:

- » **Check individuals' attitudes towards IPC**: Attitudes towards teamwork and willingness to be a team player can already be assessed during the application process.
- » **Celebrate together**: Celebrating together (successes, birthdays, etc.) as a team can further promote a sense of belonging.



3. Develop communication strategies

Communication should take place **frequently, regularly, and on multiple levels** (formal, informal), and additional space should be created for short-term coordination. Clear communication strategies and rules should be defined for the entire team: How and when do they get hold of one other, and what opportunities are there to pass on information?

Tips from professionals:

- » **Ad hoc discussions:** Simple and uncomplicated ways for exchanging information quickly are important for collaboration. Therefore, "informal conversations" should be facilitated, for example, through conducive room layouts and coordinated duty schedules.
- » **Shared documentation:** Shared electronic documentation systems should be used by all team members, and an appointment management system should be visible for everybody to facilitate interface management.
- » **Shared communication channels:** For simple coordination issues, it is appropriate to use apps (e.g., messenger services) or other tools to share information as well. Multiple groups on different topics with group leaders may also be useful. It is recommended to establish rules for using these communication channels (e.g., not at the weekend).
- » **Regular news:** To keep the entire team up to date, news can be directed to the team regularly (weekly/monthly), and low-threshold exchange within the team can be promoted. This could take place via a general folder, a bulletin board, or online.



4. Hold regular team meetings and case discussions

Regular and structured team meetings as well as **multi-professional case discussions** offer opportunities to pass on information in a collected and structured manner. The necessary rooms must be available, and the required time should be considered in the duty roster/scheduling of appointments. Participation should be possible for all team members (e.g., **also for part-time employees**).

Tips from professionals:

- » **Regular and highly relevant meetings:** Team meetings should be a high priority for all team members and should only be missed in urgent cases.
- » **Clear agenda in advance:** A clear agenda allows team members to prepare for the team meeting. All team members should be able to contribute to shaping the agenda.
- » **Moderation and timekeeper:** One person can act as a moderator or keep an eye on the time to ensure all topics get enough space.
- » **Documentation:** Protocols of team meetings enable information to be shared. All team members are encouraged to keep themselves up to date with current knowledge.
- » **Topic-specific small team discussions:** In addition to regular team meetings for the entire team, additional small team discussions between team members who jointly care for patients, or between certain professional groups, can also be useful.



5. Create and use spaces for IPC

Aspects of interprofessional collaboration should already be taken into account in relation to the premises when planning multi-professional primary care facilities. **Rooms for team meetings** as well as spaces for **informal and social exchange** are needed. Attention should also be paid to an adequate room layout that enables IPC.

Tips from professionals:

- » **Involvement in the planning phase:** Where possible, team members from various health and social professions should be involved in planning the premises according to their main areas of work.
- » **Social spaces:** Providing social spaces enables low-threshold exchange within the team, for example, during lunch breaks.
- » **Meeting rooms:** It makes sense to plan rooms where team meetings can take place undisturbed.



6. Provide regular information and training on IPC

Regular **information and training** on IPC help the team stay up to date, disseminate potential communication strategies, and increase awareness for IPC. In addition, regular training on leading multi-professional teams should be provided.

Tips from professionals:

- » **Quality circles:** Small quality circles for the entire team can be moderated, for example, by a specially trained team member.
- » **Inter-/Supervision:** The possibility of intervision and supervision for the entire team can positively support IPC.
- » **Team building and team coaching:** Externally moderated team building activities or coaching can positively influence IPC.
- » **Communication training:** Since communication within the team is a key element for the success of IPC, it is worthwhile for the entire team to complete specialized training in this area.



7. Rethink hierarchical structures and maximize the scope of practice and decision making of individual health and social professions

IPC should be considered from the beginning in decisions and structural changes. **Structural framework conditions** should be created that are **conductive to IPC**. The structures of multi-professional primary care facilities generally make it possible to redesign some traditional practices in the distribution of tasks among the professional groups, taking their (professional/legal) competencies into account. If all professional groups are permitted to **fully utilize their own scope of practice and decision making**, this often requires many coordination processes within the team but can lead to high job satisfaction and cost-efficient deployment of the various team members. **Roles and responsibilities** should be defined as clearly as possible, while still maintaining room for manoeuvre when dealing with shared competencies in everyday work.

Tips from professionals:

- » **Maximized scope of practice:** Team members should be encouraged to actively contribute their expertise to treatment processes and take on responsibility. Multi-professional case discussions, for example, are suitable for this purpose.
- » **Subteams with responsibilities:** Responsibility for selected organization-related tasks can be delegated, for example, to small subteams with one person in charge.



8. Implement structured onboarding with mentoring

To integrate new employees successfully, structured support is recommended in the sense of **onboarding with mentoring**. This allows the new team member to become familiar with the team's vision and values as well as with other professional groups or disciplines.

Tips from professionals:

- » **Welcome kit:** New team members could receive a welcome folder with all relevant information.
- » The **onboarding folder** on the Primary Care Platform website offers suggestions for designing **structured support** for new employees by "matching" an experienced colleague as a mentor and the new employee as a mentee.



9. Familiarize everybody with success factors and barriers for IPC

The team should be aware of success factors for and common barriers to functioning collaboration.

Barriers to IPC that frequently occur in teams are:

- » A lack of communication strategies;
- » A lack of a shared vision;
- » Difficulties in recognizing the roles of other team members;
- » Strong hierarchical structures;
- » Questioning the competencies of other team members; and
- » A lack of appreciation for knowledge, which is then not implemented in practice.

Tips from professionals:

- » **Awareness of influencing factors:** Awareness of barriers and success factors for IPC can be increased, for example, through targeted information or workshops on the topic.



10. Develop a shared team vision

Each individual team member should be given the opportunity to participate in the development of a **shared vision**. The continuous improvement of patient or client care is at the heart of this (**Patient-Centred Care**).

Tips from professionals:

- » **Getting to know each other in advance:** When establishing a new multi-professional facility in primary care, it is beneficial, if possible, to create opportunities for the team to get to know each other even before it is opened and to work together on developing a team vision.
- » **Team retreats:** Regular team retreats offer opportunities to continually recall the team's vision and to develop it further together.

The team at the Austrian National Public Health Institute (Gesundheit Österreich GmbH) would like to sincerely thank the following individuals and networking groups in primary care who have contributed significantly to the creation of these recommendations through workshops, impulse questions, and interviews:

Lena Aichinger; Mag.^a (FH) Susanna Finker, MPH and the networking group PVE management; Klaus Gasperl, MSc; Anna Glück; Dr. Johann Jagersberger; Sandra Keinberger, BA; Julia Marouschek-Schwarz; Theresa Vierlinger, BSc and the PHC working group on dietetics; Andrea Weiß, MSc and the professional network for physiotherapy in primary care; Dr.ⁱⁿ Elisabeth Wejborja; Elias Wetter, BSc and the networking group for nursing in primary care.

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Suggested citation: Pilwarsch, Johanna; Holzweber, Leonie; Burgmann, Sarah (2023): Recommendations for interprofessional collaboration in primary care. Factsheet. Austrian Public Health Institute (Gesundheit Österreich GmbH), Vienna
