Understanding the Values and Ethics of Interprofessional Collaboration

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Context

Interprofessional collaboration (IPC) makes sense in terms of promoting better patient outcomes while improving the experience of patient care, and it should be cost-effective as well. However, IPC is only as successful as the principles and values that underlie the commitment to collaboration, as well as the fundamental values of the healthcare system attempting to apply it.

Healthcare has no margin for error in terms of ethics. Even when there is no clearcut answer, we all have to put in the work to develop the best solution possible under the circumstances. Yet we also understand that this rigor may be lacking.

Here, we have listed the suggested competencies for values and ethics in IPC, as provided by multiple major professional organizations. After each specific competency is a brief description of what can go wrong in this domain and how to avoid falling victim to such an event.

TABLE. Values/Ethics Competencies

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<th>Work with individuals of other professions to maintain a climate of mutual respect and shared values.</th>
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<td>Specific competencies:</td>
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<td>VE1. Place the interests of patients and populations at the center of interprofessional healthcare delivery.</td>
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<td>VE2. Respect the dignity and privacy of patients while maintaining confidentiality in the delivery of team-based care.</td>
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<td>VE3. Embrace the cultural diversity and individual differences that characterize patients, populations, and the healthcare team.</td>
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<td>VE4. Respect the unique cultures, values, roles/responsibilities, and expertise of other health professions.</td>
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<td>VE5. Work in cooperation with those who receive care, those who provide care, and others who contribute to or support the delivery of prevention and health services.</td>
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<td>VE6. Develop a trusting relationship with patients, families, and other team members.</td>
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<td>VE8. Manage ethical dilemmas specific to interprofessional patient-/population-centered care situations.</td>
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<td>VE9. Act with honesty and integrity in relationships with patients, families, and other team members.</td>
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<td>VE10. Maintain competence in one’s own profession appropriate to scope of practice</td>
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Place the Interests of Patients and Populations at the Center of Interprofessional Healthcare Delivery

There are clearly competing interests that can move the patient from the center of the healthcare team’s efforts. These include placing financial incentives above the goal of most appropriate care, disorganization of the responsibilities of the team, and interpersonal factors, to name a few.

Patient-centered care provides a bright guiding star to guide the development and implementation of IPC. Always thinking about the patient first can help one avoid the barriers and pitfalls described earlier.
Moreover, this competency focuses not just on individual patients but also on populations. IPC should address the larger goals of the triple aim for healthcare: improved outcomes, a better care experience, and a reduction in health costs. The application of patient-centered care across millions of patients improves the well-being of our society as a whole.

Respect the Dignity and Privacy of Patients While Maintaining Confidentiality in the Delivery of Team-Based Care

IPC is not without potential risks. One of the primary risks is the breach of patient confidentiality. IPC depends on technology to improve communication and efficiency. The careless application of this technology can lead directly to negative consequences.

An example: A 15-year-old young woman is seeking family planning services, which can be provided without parental consent in your state. She is very fearful of her parents finding out about her prescription for oral contraceptive pills. When she calls in for a refill for her prescription, 2 members of the healthcare team promptly respond with messages at her house, not her cellphone, that her prescription is ready.

The potential implications of these actions on this patient extend beyond losing her choice to prevent pregnancy. Although IPC depends on sharing information, care must be taken to do so responsibly.

Embrace the Cultural Diversity and Individual Differences That Characterize Patients, Populations, and the Healthcare Team

There is a tremendous opportunity to improve healthcare by embracing diversity. This begins with the members of the healthcare team itself. Patients often prefer to be cared for by professionals whose background and values reflect their own, yet healthcare teams often do not look like or share common experiences with the communities in which they serve. It is a large issue, but the pipeline to careers in healthcare needs to be galvanized to create a more diverse and dynamic workforce.

Being patient-centered means respecting each patient as a culture of 1. In a multicultural society that is constantly evolving, we cannot practice in stereotypes. However, we can and should recognize common beliefs and behaviors that represent opportunities to improve not only satisfaction with care but also critical outcomes such as severe illness and mortality.

Respect the Unique Cultures, Values, Roles/Responsibilities, and Expertise of Other Health Professions

Embracing diversity extends beyond the patient to the different members of the healthcare team itself. Each member brings her or his own background, in terms of clinical skills and training, but each teammate also has something to contribute in terms of cultural awareness and experience. These skills and knowledge should be enumerated during the assignment of clinical roles and responsibilities to augment what has been standard medical care with a cultural responsiveness that can boost outcomes.

Work in Cooperation With Those Who Receive Care, Those Who Provide Care, and Others Who Contribute to or Support the Delivery of Prevention and Health Services

Listening and responding to patients in a proactive manner should be obvious. But listening to the patient’s caregivers and loved ones can be just as important. They can provide critical insights into patients’ thoughts and behaviors that would otherwise never be recorded. They are also often instrumental in translating instructions for care and improving adherence. It is difficult to achieve good levels of patient satisfaction when the healthcare team does not respond to families and caregivers. And this dissatisfaction leads to poor adherence and worse health outcomes.

Develop a Trusting Relationship With Patients, Families, and Other Team Members

Clinical practice always seems to be very busy. It is important to communicate the framework for the healthcare team early in the patient’s care plan so that the patient is appropriately oriented and can begin to participate as the central player on the team. Information should focus on who is on the team, where they are located, and their expected role. This can be delivered to the patient in an efficient format, and different methods (ie, written and verbal; video and print) may be preferred to reinforce the message.
Demonstrate High Standards of Ethical Conduct and Quality of Care in One’s Contributions to Team-Based Care

Of course, maintaining a high ethical standard is key to any successful practice. Although a diverse healthcare team is a superior model for providing comprehensive care, the assignment of providers should be driven by the needs of the patient, and not financial decisions.

In addition, the medical literature has clearly documented biases, both large and small, that hurt patient care and cost lives. The planning group for the healthcare team should understand this risk in their local practice and build in tools to provide more equitable care to all.

Manage Ethical Dilemmas Specific to Interprofessional Patient-/Population-Centered Care Situations

Ethical dilemmas are common across all practice sites, and not all practitioners have access to a trained medical ethicist. However, IPC can address difficult ethical issues with the involvement of smart, caring providers from different backgrounds, which is a strong start to resolving these dilemmas fairly and constructively. Managing ethical issues should be built into the mandate for IPC teams and be part of how they function on a regular basis.

Act With Honesty and Integrity in Relationships With Patients, Families, and Other Team Members

Healthcare team members should intrinsically understand the importance of acting honestly with patients and their caregivers. Traditionally, relationships between different team members have not always been so respectful. The IPC team should strongly discourage disrespectful communication or actions between team members and confront the inevitable breaches in this standard directly and constructively. Maintaining an atmosphere of cooperation and respect can certainly be difficult, but doing so makes the national practice environment stronger, bit by bit.

Maintain Competence in One’s Own Profession Appropriate to Scope of Practice

Although teamwork is emphasized as part of IPC, each team member is ultimately responsible for her or his own competence in treating patients. The team-based nature of IPC can actually improve individuals’ performance through transparency in outcomes and providing tools and training to improve practice patterns.

IPC is not a uniform solution to improve healthcare. Each practice site will perform IPC differently. However, regardless of location or resources, the age of IPC is here. We as a healthcare community need to embrace IPC and initiate its best practices for the sake of our patients and fellow healthcare professionals.

CME Test

References