

Promoting interprofessional collaboration and patient partnership in telehealth



Main highlights

A collaboration between patients and other professionals to improve healthcare delivery is also possible even in a telehealth context.

However, competencies such as the following are required:

- ✔ technological competencies;
- ✔ frequent and active interprofessional communication;
- ✔ acknowledgement of the roles for each team members;
- ✔ maintaining teamwork in spite of the distance;
- ✔ collaborative leadership;
- ✔ interprofessional problem solving.

Elements promoting success in interprofessional collaboration (IPC) and patient partnership in telehealth are:

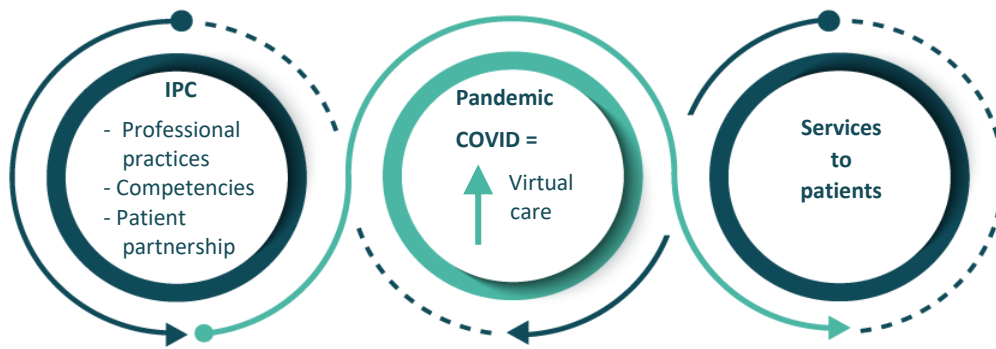
- ✔ presence of a champion in the clinical setting;
- ✔ frequent assessment of training needs;
- ✔ enhancement of the initial training;
- ✔ promotion of the advantages of using technologies to collaborate;
- ✔ acquisition of sufficient and adequate interprofessional training (initial and continuous);
- ✔ availability of technological devices.





Background

- With the development of telehealth, boosted by the COVID-19 pandemic, professionals had to rethink the way they work and interact with their colleagues. These changes occurred quickly, and professionals were neither ready nor equipped to face this new reality.
- Because of the sudden and important increase of the use of telehealth, the pandemic led professionals to work in silo and put aside interprofessional collaboration. These practices can be damaging for patients whose healthcare require the involvement of an interprofessional team. Thus, there needs to be guidelines for collaborative practices in telehealth.
- With the financial support from the Social Sciences and Humanities Research Council of Canada, a team of researchers and knowledge users worked on IPC and patient partnership in telehealth.



Approach

A scoping review was performed in order to gain a state of knowledge allowing to answer the following research question: What collaborative practice competencies are needed for telehealth by health and social care professionals?

We used the methodological framework for scoping review studies proposed by the Joanna Briggs Institute, to study scientific articles published between 2010 and 2021. The available and relevant digital resources retrieved from organizations, governments and institutional websites were included in our study. A total of 380 articles and 72 websites were screened and we selected 31 article and 17 websites from them for the present synthesis. The competencies were extracted using the National Interprofessional Competency Framework (NICP, 2010).

Results

- The concept of collaboration in telehealth is rather emergent. Thus, professionals do not necessarily feel comfortable using it and when they do, they might not use it properly.
- The aspect of digital literacy is uneven among professionals, leading to an underuse of the available technologies.
- The competency related to communication in telehealth is a key component of a successful interprofessional collaboration.
- Despite the particular context of telehealth, patient-centered care must remain the main priority in interprofessional collaborative practice. This promotes patient engagement towards his own healthcare.



- The ability to work within an interprofessional team in telehealth is closely linked to one’s digital literacy. Thus, professionals must work on enhancing their digital competencies, in order to maintain successful communication when discussing virtually with colleagues. An efficient team should know how to use different communication modalities, including a virtual mode.
- The ISO 13606 Health Informatics-Electronic health record communication, manages information sharing between professionals for patient healthcare. Even though a standard was created to compensate ethics-related issues, this component along with data security, do not account for IPC competencies in virtual care. Organizations must take actions to decrease these risks.

The following table presents barriers and facilitators for IPC in telehealth.

Facilitators	Barriers
Presence of a champion in the clinical setting	Lack of digital competencies
Activities to promote the involvement among the interprofessional team	Lack of time
Frequent assessing of needs and requirements regarding training in changing emerging technologies and provision of targeted training to professionals	Lack of confidence of professionals regarding their own abilities
Promotion of the pros to using technology in order to show a positive leadership in collaboration and confidence regarding technology	Challenges in the creation of a trust-based relationship
Availability of reliable and precise technological devices	Reluctance to collaboration / Reluctance to change
Availability of professional support from a qualified person to fix any problems linked to the technology (e.g. IT expert)	Technological issues (sound quality, network delays)



Conclusion

- ✔ Telehealth has proven to be a beneficial practice for both the patient and professionals (accessibility for healthcare)
- ✔ To maintain an efficient IPC, the newly acquired collaborative competencies should be tailored to the telehealth context
- ✔ There are gaps in the current system that disadvantage collaborative practices in telehealth
- ✔ Digital knowledge is the cornerstone for IPC tailored to telehealth. It should be good enough for professionals to make a good use of technological tools in order to favor a good communication between professionals.
- ✔ Challenges experimented by professionals who collaborate in telehealth could lead to a return to silo-based practices
- ✔ A greater support in acquiring digital knowledge, and interprofessional collaboration in telehealth, could ease the integration of this new practice among professionals. The development of interprofessional collaborative competencies in telehealth could allow a better management or risks related to ethics and patients' safety. Actions must be engaged given the particular context of IPC in telehealth. The research team suggested some recommendations in order to support the enhancement of IPC, as well as avoiding silo-based practices.

Recommandations

Government

- ✔ To allow healthcare facilities to invest in state-of-the-art telecommunication devices through major financial incentives enabling their acquisition, as well as adequate IT support.

Educational institutions

- ✔ To offer training on technologies in their initial educational path.

Healthcare institutions

- ✔ To promote the use of technologies among professionals by providing continuous training, devices and adequate IT support.
- ✔ To show a positive attitude towards technology to favor a positive leadership related to the different types of virtual collaboration.
- ✔ To determine a follow-up and interprofessional conflicts resolution plan tailored to the virtual context for each establishment.

Decision-makers

- ✔ To support the development of integrative technologies (e.g. Teams, ZOOM, etc.) aiming to support interprofessional collaboration.
- ✔ Providing clear and permanent guidelines for virtual care.



Professionals

- 📍 To engage in improving their digital literacy.
- 📍 To develop strategies that put forward the different aspects of interprofessional collaboration in virtual care.
- 📍 To acquire skills in risk management for patients' safety and ethical challenges linked to telehealth and interprofessional collaboration.

Research teams

- 📍 To study unexpected effects (e.g. referrals to emergencies) of telehealth on patients and on health social services professionals, as well as the cognitive impacts of working remotely on interprofessional collaboration.
- 📍 Collaborate with key actors to seize how IPC actually work in telehealth.

Patients

- 📍 To prepare adequately to virtual appointments using available tools.

Health technologies providers

- 📍 To ease the learning of technological tools and the interoperability between existing tools.
- 📍 To create apps and softwares that allow both the professionals and the patients to use different essential skills in interprofessional collaboration.

Further information

Additional material

- 📍 [Rapport CRSH](#)
- 📍 [Affiche scientifique](#)

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Bibliographic resources

Complete bibliography available [here](#)

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