



A Senior's Guide to Interprofessional Care

Introduction

OSCC is a client-centered organization and the priority of providing programs and services in partnership and with input from older adults is embedded in the norms and culture of the organization.

The goal of this practicum was to develop a resource tool called an *Interprofessional Care Guide* that provides a brief introduction to IP Care and assists seniors receiving and navigating the Independent Living Services at the Oshawa Senior Citizens Centres.

Research has shown that there are similar resource tools available for blood pressure journals, Community Care Access Centre service brochures, and cholesterol handbooks.

Staff were expected to incorporate IP care into their delivery of service, to practice IP Care with their colleagues and to offer a copy of the Guide along with a brief background outlining elements of IP Care within the Senior Centre. Many stakeholders were involved, including seniors, caregivers, staff, board of directors, and other community support service agencies.

The guide provides a tool for seniors to navigate and track the Interprofessional Care they receive at the Centres. It is expected that these efforts will create and reinforce a culture of Interprofessional Care within the Senior Centre. As seniors are educated and empowered, their expectations change and with an understanding of IP Care, they will expect health care practitioners to collaborate, communicate and share information relating to the delivery of health care services.

This practicum addressed four directions of the *"Interprofessional Care: A Blueprint for Action In Ontario" (July 2007)*

A.5. Direction - Building the foundation:

Strategy: Create a firm foundation upon which key Interprofessional care activities can be implemented and sustained

Action: Ensure that patients, their families...have the tools and resources they need to participate activity in care decisions

B.2. Direction - Sharing the responsibility:

Strategy: Share the responsibility for ensuring that IP Care strategies are effectively implemented among interested parties

Action: Develop a multi-level accountability framework

C.5. Direction - Implementing systemic enablers:

Strategy: Provide systems, processes and tools that will allow IP Care to be taught, practiced and organized in a systemic way

Action: Provide incentives for practising IP care

D.1. Direction - Leading sustainable cultural change:

Strategy: Lead sustainable cultural change that recognizes the collaborative nature of IP Care and embraces it at all levels of the health care and education systems

Action: Implement a Public engagement strategy

Actions

Planning:

- ✓ Research existing evidence, tools and knowledge on elements for successful tool for self-directed community support services care planning
- ✓ Engage stakeholders i.e. OSCC senior volunteers and staff in a one time planning meeting to determine effective components of a "How To" guide to IP Care
- ✓ Design and create a "How To" IP Care guide – 4 pages
- ✓ Introduce proposed Guide to identified pilot group of seniors for their input and feedback via verbal questionnaire containing 3-4 questions
- ✓ Obtain quotes from printing company, publish IP Care guide

Implementation:

- ✓ Provide In service training for OSCC Independent Living Services Coordinators (staff) on communicating standards of excellence of Interprofessional care for the seniors understanding
- ✓ Release IP Care guide for circulation to identified pilot project group in four OSCC Branches

Evaluation:

- ✓ Develop tool to measure quantitative and qualitative effectiveness of IP Care guide

Results

- ✓ Research was compiled through comparisons of other successful resource manuals available to clients accessing community support services. A prototype copy was developed based on the research.
- ✓ A working group of stakeholders, consisting of three senior centre staff, five older adult volunteers and the Collaborative Care Facilitator for the Interprofessional Leadership Project met on January 11, 2010 to reviewed the prototype IP Care guide and discussed alternative designs that would best meet the user of the document. A draft copy of the IP Care guide was completed on February 1, 2010.
- ✓ Pilot group of seniors were given the draft IP Care guide to review and provide input and feedback. The guide was revised accordingly. IP Care guide was published – 100 copies, eight pages & full colour.
- ✓ 15 OSCC programs and services staff received in-service training on Interprofessional Care on March 5th, 2010 delivered by the Collaborative Care Facilitator.
- ✓ IP Care Guide released on March 12th, 2010 through Independent Living Services staff. Goal to have 25 copies in circulation was exceeded – copies were distributed to 27 individuals along with a brief explanation on the understanding of Interprofessional Care.
- ✓ Evaluation Methods included analysis of data resulting from feedback received through the administration of client satisfaction survey and feedback from members of the OSCC staff on their perceived usefulness of the IP Care guide.
- ✓ Overall recommendations included that 4 of 5 responses indicated that the Guide was very good for improving coordination among the staff. Staff reported the desire to continue to use the IP Care guide after pilot project is completed.

Challenges

Layout:

Determining the most appropriate format for end user, i.e. size of document, size of font, content including level of detail and wording, was challenging due to the wide variety of options for consideration.

Staff Buy-in:

Five staff were selected based on their involvement in the delivery of OSCC independent services; staff participated at varying levels, one staff member was unable to distribute the IP Care Guide to seniors and the remaining four distributed between 3 and 15 Guides each to seniors accessing support services. Staff cited barriers to distribution of the IP Care Guide included lack of time, absence of client referrals during the period, too busy or client not interested.

Feedback:

40% of the clients documented as receiving an IP Care Guide did not recall having received the Guide and one client did not see it as important – this was particularly challenging and evident in situations with clients coping with dementia. The alternative was to attempt to contact the caregiver for feedback. In two cases, the caregiver was able to provide feedback and expressed appreciation of the IP Care Guide in helping them to understand the services available and commended the staff support they received to connect their family member to the various services that were available. Alternatively, if the client did not recall the IP Care Guide, the goal was to redirect the conversation to avoid any unnecessary stress to the individual.

Lessons Learned

1. It is important to have timely, quality follow-up with clients coping with dementia regarding the IP Care Guide. A strong connection and identification with caregivers is important and valuable. Need to consider strategies re follow-up on individuals with dementia.
2. It is important to reinforce staff learning and understanding of Interprofessional Care to enable them to relay and explain to clients with confidence and clarity. It would be prudent to allow opportunities to role play during the training session.
3. It is important to reinforce the understanding of Interprofessional Care with clients and caregivers. Need to consider alternative ways to repeat and explain the importance of Interprofessional Care in the delivery of health care services to individuals.
4. Client recommendations included:
 - ⊗ It would be helpful to include other community support organizations in the Guide
 - ⊗ Changes to the format and layout of the IP Care Guide
 - ⊗ Title is daunting – move definition to the middle of the document
 - ⊗ Clarify the meaning of Interprofessional Care
5. Staff recommendations included:
 - ⊗ Change the format and layout of the IP Care Guide so it is not so overwhelming for clients and caregivers – consider distributing after the initial intake interview and during the second visit
 - ⊗ Revise the wording to include a definition of IP Care in laymen's terms that can be easily understood
 - ⊗ The Guide can be used as a reminder to mention the various services available to the client during the assessment interview
 - ⊗ Helpful to include the contact person for various services in the Guide; the Guide is a handy promotional tool

New Evidence/Best Practices

- ✓ A culture of client centered care will contribute significantly to the understanding and acceptance of the philosophy of Interprofessional Care.
- ✓ Importance of timely and quality follow-up with clients and caregivers-resources required would include staff expertise and time.
- ✓ Following the completion of the practicum, the learning outcomes will be shared with other regulated health care professionals and their input and advice will be requested.

Next Steps

The following will form the future work plan. At the time of printing a grant application has been submitted to include some of these next steps for IP Care at the OSCC.

1. Continue distribution of the IP Care Guide – reprint the Guide with recommended changes based on the results of the evaluation.
2. Continue the work of the Interprofessional Care partnership group that was established to design and implement the IP Care Guide.
3. Repeat educational in-service training for staff, volunteers and seniors to reinforce the understanding of the standards for excellence regarding IP Care.
4. Explore future funding opportunity to produce the IP Care Guide.
5. Integrate IP Care into the standard of practice based on the input and feedback received from participants of the organization.
6. Continue to reinforce organization's expectation of staff to practice IP Care in the delivery of Independent Living Services at OSCC.
7. Share the IP Care Guide with other community health care providers who may be interested to partner on future publications of the guide.

Contact Information

Debra Prescott
Executive Director
Oshawa Senior Citizen Centres
(905) 576-6712 x 2835

dprescott@oshawa.ca

