

Interprofessional collaboration is vital because no single discipline can work completely alone in providing care for a patient. Usually, when in the hospital setting, multiple disciplines are required as they all function separately but make up the whole of patient care. Interprofessional collaboration improves patient outcomes. Patient outcomes are improved because each professional is working from their direct discipline and can give insight and different perspectives into what is needed for the patient. This insight differs from someone who does not work in that discipline, who would not be able to consider what someone else could, as it is not their primary area of focus.

Interprofessional collaboration also improves patient and staff satisfaction. What contributes to staff satisfaction is feeling like what you bring to the team matters and being able to express your opinion while others value it. Interprofessional collaboration involves actively listening to other people's points of view as you work together as a team for the betterment of the patient. Feeling heard and appreciated, as my point of view is valid and I am respected, is a significant factor for me in being happy in a working environment.

Patient satisfaction is improved because patients feel like they are getting help from multiple disciplines. Someone who understands their mental health. The health of their body, caring for them. Someone who works on their medication management and therapists who work on their emotional health. Physicians who work on medication changes and ensure proper treatment plans. With all of these disciplines combining and focusing on a patient, it can make a patient feel important, valued, and considered. Interprofessional collaboration can also reduce errors, such as medication errors or preventable complications, because multiple perspectives are contributing to the patient's

plan of care, and a better understanding of their condition. Interprofessional collaboration also leads to a holistic approach, which is all the disciplines working together to help the whole person.

Although each discipline acts individually in its task and focus, they all work together in understanding the patient's condition and how to best care for that patient. Interprofessional collaboration can also lower the number of times that a patient reenters care. When the patients are placed at the focus and care is conducted in a professional, organized, and effective manner. They can receive all the services that are necessary for proper healing and the continuation of their life outside of the hospital. With appropriate medication management, improved emotional well-being, and the skills that patients may learn in therapy, these all go into how the patient will use these skills once they leave the facility and help to decrease rehospitalization.

Compare and Contrast

During Mr. Jones' part one, the health care professionals maintained a very respectful and professional atmosphere. They showed continued eye contact and active listening without interrupting one another. They allowed each person to speak while adding to the conversation only once they were complete with their part of the conversation. During the meeting, they were very informative, and they took turns talking. Each discipline combined information to form an active and knowledgeable team. They agreed on a plan to huddle twice to discuss changes, and they were all very

respectful. Thanking each other for their participation, showing respect, and nodding to show engagement and understanding of topics.

In part 2, the conversation felt different. The psychologist was accusative towards the patient. The nurse felt like she needed to defend the patient and advocate for his sobriety, but the psychologists interrupted the nurse twice, implying that she had a soft spot for the patient. The nurse did well in expressing how she felt, as far as saying that he had already interrupted her twice and diverted the conversation to getting to the bottom of the situation.

The psychologist was apologetic and expressed his frustration. The nurse was able to check the blood sugar and provide intervention. The nurse also did a good job in following up with the pharmacist. The pharmacist was very professional in her interaction. She did not belittle anyone or blame anyone for the mistake. The physician expressed interest in the topic when it was first brought up, as if it were important, but when they found the discrepancy and reached out to him multiple times, he then said that it was not serious. He denied it as being an urgent matter but stated he would see what he could do. I can imagine that the pharmacists and nurses felt at this moment that the doctor was not working well for the benefit of the patient.

Forming the meeting to discuss the error was the correct way to go about the situation. The nurse did vent about feeling overworked and understaffed. When this was stated, neither the pharmacists nor the physician said anything to express that the nurse was being dramatic in that sense. Instead, they continued to move on with the conversation as they listened better to each other.

During this encounter, the pharmacist took on responsibilities for the mandated reporting. Towards the end, I did notice that the physician was alternating from looking at the pharmacist at eye level to downward glancing, and then back to eye level as the conversation continued. This alternating glancing did not occur from the beginning of the conversation. This change could be interpreted as a lack of interest and a reflection of wanting to be finished with the conversation.

Part one showed a clear picture of what interprofessional collaboration should look like. Part two showed a mixture of what that should look like, but also what it should not. Overall, this assignment expanded my understanding of the importance of interprofessional collaboration and how it all ties into the betterment of the patient and work environment.

References

Interprofessional Professionalism Collaborative (IPC). (2019). IPP Tool Kit. Video #1:

The Case of Mr. Jones Part I.

<https://www.interprofessionalprofessionalism.org/toolkit.html>

Interprofessional Professionalism Collaborative (IPC). (2019). IPP Tool Kit. Video #3:

The Case of Mr Jones Part II.

<https://www.interprofessionalprofessionalism.org/toolkit.html>