Interprofessional Perceptions of Collaboration in a Pediatric Hospital Setting: An Academic/Practice Research Partnership

MaryDee Fisher, DNP, RN, CPN; Sue Sterrett, EdD, MSN, MBA Heather Ambrose, DNP, RN, CPON, CPN & Donna Weyant, MSN, RN, CPN
Children's Hospital of Pittsburgh of UPMC and Chatham University: Pittsburgh, PA

Background
- Increased complexity of care.
- Unparalleled demand for high quality, safe & patient-centered care.
- Interprofessional collaboration (IP) essential to achieve these outcomes.

Study Aims
- Explore relationship between perceptions of collaborative team practices & outcome measures.
- Describe clinicians' perceptions on patient care units.
- Relationship of clinicians' perceptions & patient/family satisfaction scores.
- Identify barriers to IP collaborative practice.

Method
- Prospective, descriptive, mixed methods study.
- Units clustered by type per workflow.
- CPAT Collaborative Practice Assessment Tool (CPAT). [Schnuder, et al., 2011]
- Patient/family satisfaction scores from Press Ganey (PG) survey.

Discussion of Results
- Overall CPAT score of 5.51 indicates overall IP collaborative practices.
- Patient involvement domain (6.18) reveals most advanced levels of teamwork.
- Decision-making & conflict management domain lowest mean score (4.53).
- No correlation revealed between CPAT & PG scores.
- Implications for improved structures, processes, & educational offerings to increase collaboration.

Academic Service Partnerships
- Faculty worked collaboratively with hospital administrators on clinical practice issue.
- Follow-up enables collaborative efforts to impact organizational systems & processes to improve health care outcomes.
- Academic/Practice partnership supports ANCC’s Magnet Model & is consistent with AACN’s Advancing Healthcare Transformation: New Era for Academic Nursing report.

Mean Scores of CPAT by Overall Hospital and Unit Types

<table>
<thead>
<tr>
<th>Domain</th>
<th>Overall</th>
<th>ICUs</th>
<th>Medical-Surgical</th>
<th>Medical</th>
<th>Surgical-Perioperative</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mission, Meaningful Purpose, Goals</td>
<td>5.84</td>
<td>5.81</td>
<td>5.84</td>
<td>5.76</td>
<td>5.96</td>
</tr>
<tr>
<td>General Relationships</td>
<td>5.93</td>
<td>5.87</td>
<td>5.88</td>
<td>5.97</td>
<td>6.09</td>
</tr>
<tr>
<td>Team Leadership</td>
<td>5.48</td>
<td>5.41</td>
<td>5.60</td>
<td>5.15</td>
<td>5.65</td>
</tr>
<tr>
<td>General Role Responsibilities, Autonomy</td>
<td>5.41</td>
<td>5.42</td>
<td>5.92</td>
<td>5.17</td>
<td>5.34</td>
</tr>
<tr>
<td>Communication &amp; Information Exchange</td>
<td>5.59</td>
<td>5.64</td>
<td>5.69</td>
<td>5.10</td>
<td>5.56</td>
</tr>
<tr>
<td>Community Linkages &amp; Coordination of Care</td>
<td>4.85</td>
<td>4.92</td>
<td>5.01</td>
<td>4.10</td>
<td>4.80</td>
</tr>
<tr>
<td>Decision Making &amp; Conflict Management</td>
<td>4.53</td>
<td>4.6</td>
<td>4.42</td>
<td>4.54</td>
<td>4.52</td>
</tr>
<tr>
<td>Patient Involvement</td>
<td>6.18</td>
<td>6.20</td>
<td>6.35</td>
<td>6.14</td>
<td>5.87</td>
</tr>
</tbody>
</table>