



# Interprofessional Collaboration

## Addressing Conflicts Between Health Care Professionals

Carole Chatalalsingh, PhD, RD  
Practice Advisor & Policy Analyst  
carole.chatalalsingh@collegeofdietitians.org

An elderly client presented at a hospital outpatient clinic with severe malnutrition secondary to cancer and is currently not able to meet nutritional needs through enteral feeding. The client is willing to try TPN to supplement enteral intake as recommended by their doctor, however, the client is hesitant about managing TPN at home. The clinic's Registered Dietitian (RD) assessed the client and felt

that TPN would be helpful in the short-term, but to mitigate risk of infections and other complications, the RD recommends that the client should be admitted to the hospital. The physician feels the client can manage at home on TPN and does not wish to admit the client for inpatient treatment.

How should the RD proceed?

The College receives inquiries from RDs who are often faced with managing conflicts among team members. Communication with our colleagues can be more difficult than speaking with the clients. In keeping with the objects given to health professions colleges in the *Regulated Health Professions Act, 1991*, the College promotes inter-professional collaboration with other health professions. Interprofessional collaboration requires RDs to understand their own professional identity while gaining an understanding of other professional's roles in ever-changing dietetics work environments.

In the scenario above, the client's best interests must always be the primary consideration. Clients often have complex health needs that typically require more than one health care professional to address issues regarding their health status. Every professional will be expected to use their knowledge, skills and judgment to determine whether and how to treat the client.

### TAKE RESPONSIBILITY FOR YOUR PROFESSIONAL RELATIONSHIPS

RDs are expected to refrain from implementing services they believe compromises client safety and well-being. Occasionally, however, professional opinions will differ. When this happens, each member of the team bears the same responsibility to engage collaboratively to address

the disagreement in the client's best interest. Evidence shows that, when health care professionals work and learn together to share their knowledge and skills, the quality of client care improves. RDs have the responsibility, in the client's interests, to make interprofessional relationships work.

### APPLY CONFLICT MANAGEMENT SKILLS

When you disagree with the decision of another health professional, consider the following conflict management skills as you move forward:

- Choose an appropriate time and place to communicate your views to them;
- Review the situation and know the facts;
- Approach others with a collaborative attitude and an open mind (e.g., instead of criticizing, engage your colleague in a discussion of what options might best serve the client);
- Maintain a respectful dialogue, asking and listening to the other's point of view;
- Keep your focus on what is best for the client. Do not use clients to argue or lobby for your own position;
- Appreciate that differences can enrich decision-making resulting in more comprehensive client services;
- Document the discussion and results; and

- Adhere to your organization policies regarding this matter.

Interprofessional collaboration should be seen as a relationship between health care professionals and the client in a collaborative and coordinated approach to shared decision-making. (Other suggestions are outlined in the *Jurisprudence Handbook for Dietitians in Ontario*, pp.17 -19. )

### OPPORTUNITY FOR LEARNING

If you cannot resolve the disagreement to your satisfaction, you should not take any action that you feel would compromise the client. You may need to bring the disagreement to an appropriate third party. In such a situation, documentation is important to outline how the situation was managed and to clearly demonstrate the efforts that were made to advocate for client-centred services while respecting interprofessional relationships.

This situation may be seen as an opportunity for program planning, policy development and team learning, specifically around how professionals on the team can best use their knowledge and skills to serve the clients. Implementing such processes may give RDs an opportunity to engage in team learning through which knowledge is shared, created and sought in order to benefit the individual, the team, and most importantly, the client.

### RESOURCES

The College has several resources to help RDs work collaboratively with others, these are:

- IPC e-learning module (2013)
- Are You a Knowledge-Creating Team Member? (Fall *résumé* 2012, p. 6)
- Building Capacity for Collaborative Leadership In Knowledge-Creating Teams (Winter *résumé* 2013, p. 9)
- Enhancing Capacity for Interprofessional Team Learning (Spring *résumé* 2012, p. 4)
- Enhancing Capacity for Interprofessional Care (Winter *résumé* 2012, p. 5).

Another excellent resource developed by the *Federation of Health Regulatory Colleges of Ontario* is an e-tool to support interprofessional communication. Refer to the following link: <http://ipc.fhrco.org/>

Health Force Ontario has developed the *IPC Charter Resource Guide*. This Charter was developed to foster a shared vision of collaborative care and a common language to advance IPC competence and communication. This may give RDs new ideas and strategies to approach situations and communicate with fellow colleagues. The caregiver commitment statements contained in it may provide further guidance on managing interprofessional relationships.