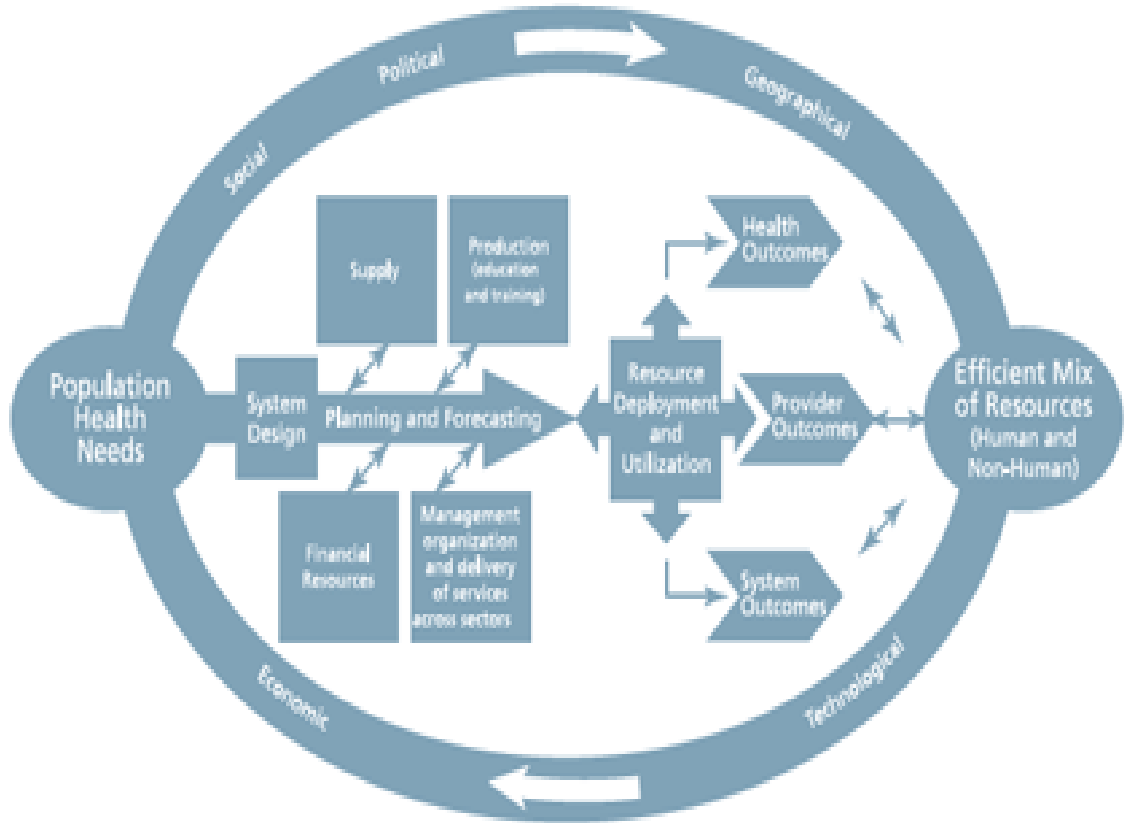## FRAMEWORK FOR CLE PROJECT

The CLE project was developed in recognition of the policy and program imperatives surrounding the health system. In particular the CLE project flows from the 2003 commitment of federal, provincial and territorial governments to enhance teamwork in the delivery of health services as a basis for addressing human resource shortages in the health sector as well as improving system efficiency and effectiveness. To frame the CLE project, proponents of the project relied on the 2005 work of O'Brien-Pallas, Tomblin Murphy, Birch, and Baumann which modelled the interplay among social, political, geographic, economic, and technological factors in the development of human resource strategies and plans for the health system (Figure 1 below). The model recognizes that the health status and demographics of the population as well as evaluation of outcomes inform changes and improvements to the health system and human resource planning.

In addition to supply of workers and fiscal resources, the model identifies the importance of worker education and training as well as management, organization decisions in planning for health system and health human resources.

The CLE project focuses on two components of the model: Production, and Management, Organization, and delivery of services.

Figure 1: Health System and Health Human Resources Conceptual Model*

LINKS BETWEEN CLE PROJECT AND HHR CONCEPTUAL MODEL – EDCUATION AND TRAINING (PRODUCTION) ELEMENT

Three areas/domains related to knowledge, skills, attitudes are supported and enhanced (based on *BC Competency Framework for Interprofessional Collaboratio*n):

I. **Communication** - consistently communicates in a responsive and responsible manner, demonstrating sensitivity to other professions and professionals.

II. **Patient-Centred and Family-Focused Care** - negotiates and provides optimal, integrated care that is respectful of and responsive to patient/client and family perspectives, needs, and values.

III. **Collaborative Practice** - establishes and maintains effective working partnerships with other professionals, patient/clients, families, other teams, organizations, and individuals to achieve common goals.

A. Collaborative Decision-Making - Identifies patient/client-centred goals; establishes and focuses on common goals; shares decision-making with others; implements joint decisions once all options and evidence are provided and discussed

B. Roles and Responsibilities - Consults, seeks advice and confers with other team members based on a clear understanding of everyone's capabilities, expertise and culture.

C. Team Functioning - Uses team building skills to negotiate, manage conflict, mediate between different interests and facilitate building of partnerships within a formalized team setting.

D. Continuous Quality Improvement - Works with an interprofessional team to contribute to continuous improvement of the health care system, particularly in the area of patient/client safety by mitigating errors, increasing efficiency, and minimizing delays.

LINKS BETWEEN CLE PROJECT AND HHR CONCEPTUAL MODEL - MANAGEMENT, ORGANIZATION AND DELIVERY ELEMENT

Teamwork offers positive benefits for patient care and for the efficiency of the health system. Actions at multiple organizational levels are needed to create and support teamwork in the delivery of health services. Based on research done by University of Toronto Office of Interprofessional Education (created by Health Sciences and Social Work Faculties), these actions may include transforming the culture of an organization. The U of T IPE Office has identified a three step process to support transformation:

1. Create partnerships with health professional leaders who shape the culture of our institutions;
2. Create structured communication tools to be used to improve collaborative practice; and
3. Facilitate professional development of multi-professional teams to promote team building and the implementation of communication tools at the site.

This process builds on work at each site to assess need and opportunity for introducing or enhancing inter-professional teamwork in delivery of health services. Based on the needs assessment, communication tools are developed for the site to enable the transformation at a site. In addition, a professional development program in inter-professional care is designed for teams of professional leaders, chosen at the site and representing different professions.

The organization at each site implements and evaluates communication tools and professional development programs. The organization monitors and documents impacts of teamwork on patient outcomes, provider retention, and quality and efficiency of care (system outcomes). To sustain change, the organization produces structured learning opportunities for pre- and post-licensure training. The organization develops 'case studies' for use in future professional development at the site and by other sites as well as and for integration into pre-licensure curricula.

The organization refines evaluation tools.