# Interprofessional Communication Challenges – Mrs. Jones

## Description

**This simulation has two scenarios from which to choose**, each with different levels of difficulty. All scenarios involve ethical and procedural challenges that require communication among a Registered Practical Nurse (RPN), Personal Support Worker (PSW) and a Recreational Therapist (RT). The focus is on problem-solving, conflict resolution and ethical decision-making in a patient-care team.

## Notes to Facilitator

There can be three to six participants, depending on class size with at least one participant assuming each role. To prepare participants for the role we suggest starting with a warm-up exercise in which each participant introduces themselves in role (see [Warm-up Exercise below](#_Warm-up_Exercise_for))**. Note that scenario 1 has two charts for two different people with the same name.**

What are your learning objectives for this exercise or course? What prompts could you add to extend or expand the simulation in that direction? What additional resources or assignments might you add?

### *Preparation*

Prior to the simulation, ensure participant contact information (e.g, emails, selected chat platform, or phone numbers for texting) is easily accessible on a list that includes their assigned roles (see [Appendix A: Sample Health Role Chart](#_Appendix_A)). During the simulation, you will need to contact certain characters, so advance planning is helpful. If online, you can copy and paste prompts using email or a chat function. If delivering the simulation in person, you could continue to use email or chat for hybrid delivery, or use cue cards or slips of paper to communicate. Not all characters will receive correspondence from the facilitator(s) in role; those with privacy concerns can be assigned non-contact roles. Be aware of your organization’s PIPA position. **Discuss privacy issues in advance and modify accordingly.**

## Professional Roles

The following roles should be assigned to participants before the simulation begins. **Read out loud** the responsibilities of each profession, and distribute copies to participants, before the warm-up to provide this information to all participants.

Personal Support Worker (PSW): as a PSW you are required to assist a resident in activities of daily living (ADL) including transferring a patient (e.g., from a chair to a bed), skin care, oral and personal hygiene, toileting, feeding, hydration, documentation and charting, reporting changes in behaviours and/or moods, ensuring safety and safety protocols, reading and understanding the resident’s care plan.

Recreational Therapist (RT): as an RT you are required to assist residents with exercises when necessary. Your primary focus is on the social aspect of care, e.g., activities, crafts, outings, etc.

Registered Practical Nurse (RPN): as an RPN you are required to provide medication, change dressings, feeding, provide reports to PSWs, assist PSWs when required, review and write documentation, and act as a supervisor to the PSW.

## Warm-up Exercise for both scenarios

You have been given a description of the three types of professionals in the role play. Take a moment to review your assigned profession now. In the role play, use your actual first names and introduce yourself to everyone else as if you are meeting for the first time. When you meet, provide a brief history of why you chose this profession and ask one another simple background questions, such as why healthcare is important to each participant.

## Foundational Scenario

You have just started working in a long-term care facility, Bright Days Assisted Living, for your institution’s practicum and this morning is your first shift. You are part of a pilot program bringing together multidisciplinary teams of students or professionals to discuss patient needs with the intent of reporting to your onsite supervisors. The facility has over fifty residents, but as a new team you have been asked to meet to discuss a care plan for one resident: Mrs. Emma Jones. She is new to the facility and you haven’t met her yet. At this meeting, you are discussing the requirements for Mrs. Jones based on the notes provided to you, and what tasks each team member needs to carry out. Every member of your group has access to a chart note.

**For facilitator:** Print out copies of the chart notes for the participants, [both available in Appendix B](#_Appendix_B)

## Scenario 1

*Warm-up recommended before starting.*

Based on the chart note, describe for each other what each one of you plan to do to assist Mrs. Jones. Explore how you might support one another.

**For facilitator:** The RT and the PSW are provided a chart note for Emma Jones who is 79 years old with high blood pressure. The nurse is provided a chart note for Emma Jones who is 83 and has hepatitis. After a few minutes, message the RPN: *“This is the RN. Please provide me with a summary of the patient.”*

[**Watch an Example with Learners of Scenario 1**](https://youtu.be/bi0_3cXgAY0)

## Scenario 2

*Warm-up recommended before starting, unless it has already been done during the session.*

Based on the chart note provided, describe for each other what you plan to do to assist the patient. Explore how you might support one another. Consider the appropriateness of any texts received and how you might respond. If appropriate, discuss with your colleagues.

**For facilitator:**

* Provide the chart note to all participants for the Mrs. Jones born in 1939.
* Immediately message the RT: *“I’m your new RT colleague. Welcome! Mrs. Jones frequently sets off the door alarm because she gets agitated and needs to move and walk. It might be a good idea to set up an additional walking schedule as this might help her calm down.”*
* After approximately two minutes, message the RPN as the Patient Care Manager: *“I’m the Patient Care Manager. I understand you’re reviewing Mrs. Jones. There’s been lots of talk about her needs. Under no circumstance change anything in her care plan. We don’t have the time to help.”*

[**Watch an Example with Learners of Scenario 2**](https://youtu.be/xGjWJ64rAYI)

## Debriefing

### *Interpersonal*

* How would you rate the degree of collaboration among team members? Provide examples.
* How smoothly did the meeting go? Did any of the players monopolize the conversation? Were there areas of contention? Were they resolved? How?
* Did the team members play to their strengths? How?
* Did you find ways to divide responsibilities according to expertise?
* Did a leader naturally emerge?
* What status and positions of power did each of you hold? Was it negotiated or claimed?

### *Issues*

* How did you respond to any message received? How did you respond to shared messages? What is your position on secrets?
* Did issues of transparency, trust, hierarchy, secrecy and/or disclosure arise during your conversation? How does the degree of risk impact these issues?
* What formal procedures could assist in establishing consistent and holistic care?

## Extensions

* Watch [Scene 5](https://youtu.be/U9XnAx5T6Qs) and [Scene 11](https://youtu.be/EBrI8ZWO740) from ['Person-Centered Care: Finding Dignity within the Shadows'](https://mirrortheatre.ca/performance/understanding-person-centered-care/)
	+ How does time affect patient care in medical settings?
	+ How do medical infrastructures assist in or impede patient care?

## Assignments

The following suggestions could be undertaken either as a group or individually. They could be written as reflections, offered for discussion, or submitted as assignments for grading.

1. What are the descriptors of a well-functioning team? What structural and personal characteristics can foster or impede a well-functioning team?
2. Given the different roles of team members, and perhaps different perceptions of authority among those roles, how do you respond to each other as a team? Do perceptions of power differentials impact how you work together?
3. What protocol concerns have been raised? How might you address them?
4. Who might you contact, and how would you word your message?
5. How would you navigate the conflicting expectations between hospital protocols/ policies/ procedures and patient needs?
6. Given some of the messages you’ve received, how do you feel about working for Bright Days Assisted Living? How do you feel about the staff from whom you or your team have received messages?

## Readings

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## Appendix A

Sample Role Assignment for Interprofessional Communication Challenges – Mrs. Jones

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| --- | --- | --- | --- | --- |
| Insert Actual Name | Group | Role | Scenario | Contact Information |
| Donald Westphali | 1 | PSW | 3 |  |
| Vijay Kochar | 1 | PSW |  |  |
| Jack Morrison | 1 | RT | 2 |  |
| Annie Cavanero | 1 | RT |  |  |
| Ellen Craig | 1 | RPN |  |  |
| Faith Yee | 1 | RPN |  |  |
| Shirley Daniels | 2 | PSW | 3 |  |
| Philip Chandler | 2 | PSW |  |  |
| Mark Craig | 2 | RT | 2 |  |
| Paulette Kiem | 2 | RT |  |  |
| Neela Rasgotra | 2 | RPN |  |  |
| Robert Romano | 2 | RPN |  |  |
| Yosh Takata | 3 | PSW | 3 |  |
| David Morgenstern | 3 | PSW |  |  |
| Chuny Marquez | 3 | RT | 2 |  |
| Meredith Grey | 3 | RT |  |  |
| Cristana Yang | 3 | RPN |  |  |
| Derek Shepherd | 3 | RPN |  |  |
| Lexi Grey | 4 | PSW | 3 |  |
| Callie Torres | 4 | PSW |  |  |
| Agnes Kao | 4 | RT | 2 |  |
| Helen Sharpe | 4 | RT |  |  |
| Vijay Kapoor | 4 | RPN |  |  |
| Jackie Peyton | 5 | PSW | 3 |  |
| Gloria Akalitus | 5 | RT |  |  |
| Zoey Barkow | 5 | RPN |  |  |

## Appendix B

**Chart Note – Mrs. Jones**

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| --- |
| Bright Days Assisted Living |
| CARE PLANResident Name: EMMA JONESDate of Birth: 08/01/1939Power of Attorney (POA): WifeHas this resident has any medical or cognitive issues?* Resident diagnosed with dementia. Significant cognitive issues understanding instructions. Concern for wandering.

Standing orders for the patient.* Resident requires regular medication for dementia.

ADL (Activities of Daily Living) function.* Resident mobile. Physically able to stand up and walk. Enjoys physical activities and often sings with others when encouraged. Requires assistance when toileting. Needs some assistance when feeding.
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**Chart Note – Mrs. Jones**

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| --- |
| Bright Days Assisted Living |
| CARE PLANResident Name: EMMA JONESDate of Birth: 04/28/1943Power of Attorney (POA): HusbandHas this resident has any medical or cognitive issues?* No cognitive issues. Resident diagnosed with hypertension and diabetes.

Standing orders for the patient.* Regular blood pressure medication. Diabetes controlled.

ADL (Activities of Daily Living) function.* No significant concerns. Requires a cane for stability. Able to toilet self without assistance. Enjoys walking on own but is not particularly sociable. Prefers independent activities such as puzzles and crosswords.
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