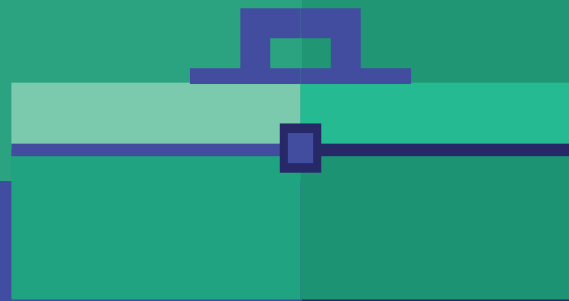


ADVANCING COLLABORATIVE TEAMS (ACT) TOOLKIT



Toronto Academic Health Science Network
Practice Committee

and

University of Toronto Centre for
Interprofessional Education at the
University Health Network

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Dear Colleague,

Thank you for your interest to implement the Advancing Collaborative Teams (ACT) Toolkit with your team. This work is important to advance a quality culture with consistent approaches and measures for interprofessional care (IPC) across our health system. High performing teams are a critical enabler of safe, quality patient care, and a positive patient experience. Psychological safety is the foundation of success for high performing teams.

The Toronto Academic Health Science Network (TAHSN), in collaboration with the Centre for Interprofessional Education (CIPE), adopted the 6 competency domains of the Canadian Interprofessional Health Collaborative (CIHC) National Interprofessional Framework¹, and developed an IPC Framework to support integration of the competencies into practice and care. Through an interorganizational IPC working group, the ACT Toolkit has been developed as a systematic process that enables teams to reflect on their performance and prioritize opportunities and methods for their development in a Team Action Plan. The process is comprised of four steps and utilizes reliable and valid assessment tools to evaluate IPC competencies and psychological safety.

We hope the ACT Toolkit will support your team in this process to advance collaboration and development for high performing teams. We look forward to learning more from your experiences in order to advance learning across our health system.

Thank you once again, for your time, your passion, and your commitment to interprofessional education and care.

Regards,
TAHSN/CIPE Interprofessional Care Working Group

Determining your ACT Lead(s):

ACT Lead(s) are key champions who will provide leadership and facilitation to support their team through implementation and evaluation of the process. ACT Leads may be directly part of the team, with influence within as a team member or leader, or a leader outside of the team, with expertise in interprofessional care, education or facilitation. There is value in a co-leadership model that may partner leaders/champions within the team and facilitators with expertise or perspective outside of the team. One recognized model of success is having co-leads from different professions and roles as this enhances the opportunity for interprofessional collaborative leadership. Additional education for facilitation is available to support ACT Leads through TAHSN/CIPE professional development programs through ACT train-the-trainer and TAHSN/CIPE professional development programs (See ACT Website Link in Appendix A).

Defining your Team:

A team is defined as interdependent people with complementary skills who are committed to a common purpose, performance goals and approach for which they hold themselves mutually accountable.² Participants should be invited to participate based on key team membership, inclusive of various professions and roles. Teams are encouraged to reflect on and challenge their traditional notion of a team, considering members who have both a regular and/or intermittent presence. Team members should include providers, leaders, patient/client/family or learner representatives that are part of the patient/client journey, including involvement of inter-organizational or inter-sectoral roles dependent on the scope of the team. Consider inclusion of both clinical and non clinical roles, such as administration, clerical, management and coordinators that are part of the team. Support within a team, as well from leadership and management at all levels, are critical success factor when considering team participation. A key identified element of success is supporting dedicated time to participate and using creative strategies, such as scheduling and broad team communication, to ensure all team members have an opportunity to share their voice and perspectives.

Psychological Safety:

Psychological Safety is defined as a “shared belief held by members of a team that the team is safe for interpersonal risk-taking.” Psychological safety is “a sense of confidence that the team will not embarrass, reject or punish someone for speaking up”³. It describes a team climate characterized by interpersonal trust and mutual respect in which people are comfortable being themselves. In psychologically safe spaces, team members are accountable to themselves and one another to nurture their relationships and the process where people feel they have permission to and are able to share potentially high risk information. ACT Leads will review the psychological safety component of the team assessment and play an important role in creating a safe team climate where team members feel safe to fully engage in the social process. There is evidence of increased psychological safety and engagement when leaders display inclusiveness, intentionally inviting perspectives from other members.⁴ Further, leadership can support psychological safety through modeling and creating accountability, authenticity, respectful communication and empathy. Additionally, activities such as “Creating Team Norms”, (team norms are defined as a set of rules/guidelines that a team establishes to shape their interactions), from the ACT Competency Activity Inventory (See ACT Website Link in Appendix A), can be important to create a safe team climate for this process. This is particularly important where differences in power, status or hierarchy may exist within a team.

Setting the Team Schedule:

The ACT Leads will create a Team Schedule for participating team members. This needs to be customized for the team to ensure it is convenient for team members to attend, with team and space arranged to support the team well in advance. A sample 8 week team schedule, based on a short 4 week implementation cycle, has been provided below for consideration. Teams are encouraged to learn from and repeat the intervention cycles with adapted and/or new interventions. A minimum of 6 team meetings is suggested for the process but schedules will vary per team and every team will determine a different duration for their process dependent on their interventions. Value has been recognized in time durations greater than 8 weeks if available to support longer term change.

Sample Team Schedule:		
Team Orientation	Week 0	Lead(s) review the workbook, the accompanying IPC framework, solidify plans and orient the process to the team.
Team Assessment Completion	Week 1	Teams will complete the Team Assessment through paper or online completion of the assessment.
Analysis of the Team Assessment Results and Action Plan Creation	Week 2	Teams will meet in a Team Debrief meeting (approx. 1-2 hour) in week 2 to review assessment results and create an initial Team Action Plan.
Action Plan Implementation of One Rapid Cycle Intervention and Reflection	Week 3-6 (at minimum)	Schedule 4-6 meetings at minimum over this time period (approx. 30 minutes to 1 hour) to support teams to refine Action Plan as needed and implement identified actions and activities. Additional meetings can be planned as able.
Team Re-Assessment and Evaluation	Week 8	A final Team Reflection meeting (approx. 30 minutes to 1 hour) will occur following the completion of final assessments/evaluations. Sustainable ongoing action plans can be established at this time beyond the process. Other intervention cycles can be implemented with adapted and/or new interventions.

Step One: Team Orientation and Assessment

Time Frame: Week 1

Responsibility: ACT Lead(s) and Participating Team Members

The focus of this step is to introduce the team to the IPC competencies, purpose and process steps of the ACT Toolkit. It is important for the ACT Leads to emphasize the importance of the purpose of the process for teams to explore and appreciate the best of what is happening and to identify any ideas and opportunities to improve together. All team members are welcomed and introduced to each other. An Introduction Slide Deck is available to support Leads for educational content and creative activities to orient the team. In preparation, it is helpful to support ACT Leads to review the Interprofessional Care Competency Framework, the ACT workbook and accompanying Competency Activities.

Key actions include to:

- 1) Introduce the six competencies from the Interprofessional Care Competency Framework.
- 2) Provide an overview of the ACT Toolkit process including the steps of assessment, analysis, action planning, reflection and evaluation.
- 3) Describe the meeting schedule and what to expect from each step of the process.

Following this, the Team Assessment will be distributed either through paper assessments or online survey links available. This assessment will take approximately 15 minutes for an individual to complete over a week time period and data is anonymized in group data without individuals being identified. The team will need to be reminded to complete the assessment throughout the week. All ACT resources ie. IPC Framework, Introduction Slide Deck, Competency Activity Inventory, Team Assessment, Evaluation are located on the ACT website (link in Appendix A).

Step Two: Team Assessment Analysis and Debrief

Time Frame: Week 2

Responsibility: ACT Leads

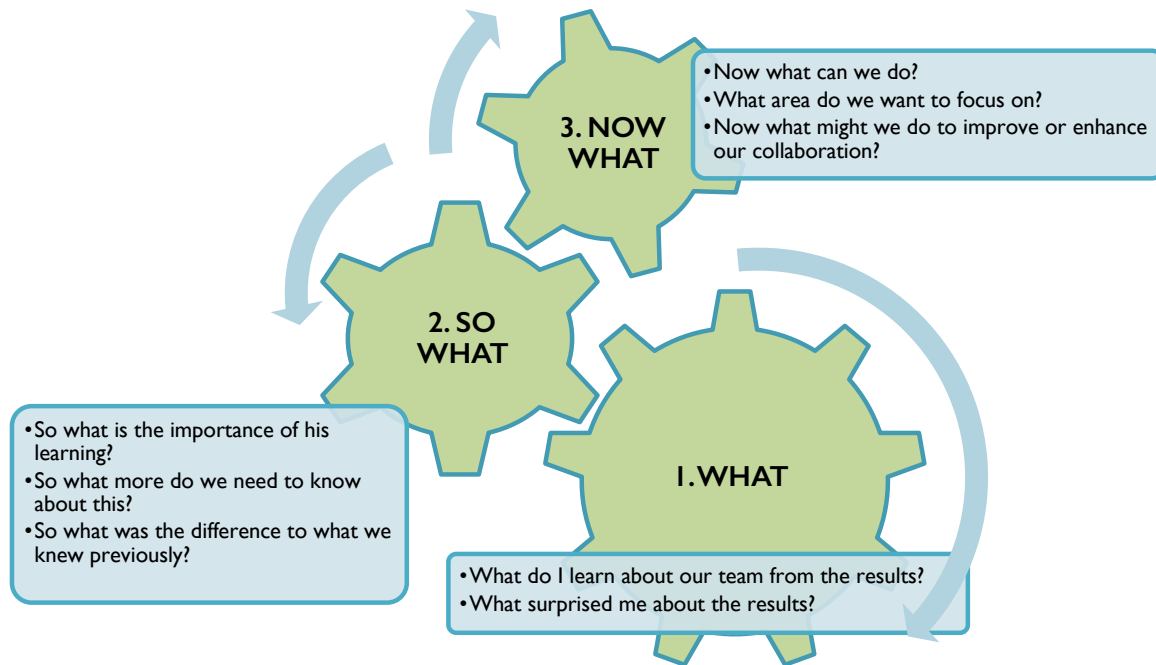
The ACT Leads will compile completed results from analysis of paper assessments or online survey data of the Team Assessment. Suggested analysis includes:

1. Survey results from the Assessment of Interprofessional Team Collaboration Scale (AITCS)₅.
2. Summary of the top 5 and lowest 5 scoring results from the AITCS.
3. Summary of ratings from the Psychological Safety questions and comments/themes from qualitative questions of the Collaborative Practice Assessment Tool (CPAT)₇.

It is recommended that the ACT Leads review the key results and themes with team leadership (ie managers, practice leaders) in advance of the Team Debrief Meeting. Key themes from the Psychological Safety and CPAT qualitative questions will help to understand the team climate in advance of the debrief. Results can be shared as a whole or summarized in key themes and can be sent in advance for team members to better prepare for the process. The Team Debrief meeting requires approximately 1-2 hours and will be facilitated by ACT Leads. The ACT Leads will engage the team to reflect on results and it may be helpful to use the reflection framework in the Workbook to guide your discussion. As the team considers the results/themes of greatest interest for change/action, facilitate this discussion to prioritize a key team IPC competency and to co-create team goals for an initial Team Action Plan. Development of team norms at this stage are encouraged to support the team process and climate.

Reflection Framework

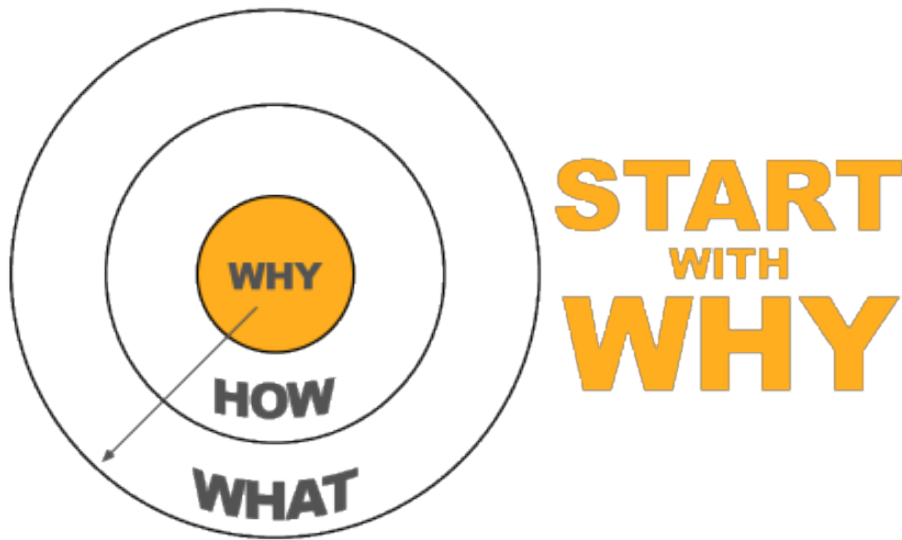
Use this framework to guide your review of the results.



The results will help the team to decide on the area they would like to focus on for the course of the pilot. The ACT Leads will work with the team to select one IPC competency, as an area of focus. For this one competency, the team will create a Team SMART Goal.

S	M	A	R	T
<p>Specific:</p> <p>What exactly do you want to achieve?</p>	<p>Measurable:</p> <p>How will you measure and demonstrate the extent to which the goal has been met?</p>	<p>Attainable:</p> <p>Is your goal feasible and achievable?</p>	<p>Realistic:</p> <p>Is your goal and timeframe realistic?</p>	<p>Timeframe:</p> <p>When will your goal be completed?</p>

Know Your “Why”⁸



As you work with your team, encourage your team to reflect on “Why” they have selected the competency they would like to work on and why this is important to them. Starting with “Why” helps teams to make explicit the values that are foundational to their team and their common purpose. Although there may be more than one area the team is interested to explore and develop, for the initial process, it is recommended that only one competency be selected.

What interprofessional competency have you chosen to work on?	
What is your overarching SMART Goal Statement? <i>Ensure your goal is SMART</i>	
This goal is important to your team because...	

Team Action Plan and Activities

To achieve the Team Goal, the team will identify activities or change ideas to be implemented during the Action Planning Cycle. The team may choose to work on an area of opportunity, or a strength they would like to further enhance. To support idea generation, IPC Team Activities related to competency building, are available (Appendix under ACT Resources). To support idea generation, Team Activities and Change Ideas, related to competency building, are available on the ACT website are available in the ACT Competency Activity Inventory on the ACT Website for review by ACT Leads and team members. Changes may be adaptations of existing or new structures that the team would like to try to support their growth (e.g. adding 5 minutes of open space at the beginning and end of all meetings, adapting team rounds etc.). They can be as creative as possible but should be collaboratively agreed upon by the team, aligned with the SMART goal (ie should be realistic within time frame) and informed by competencies/gaps from the ACT Team Assessment.

Team Action Plan Template:

Our Goal is:			
Specific What activities or change ideas will you complete to accomplish your goal?	Measurable How will you measure your activity?	Timeframe When will you complete the activity by?	Lead Who will lead this work?
1.			
2.			
3.			
4.			
5.			

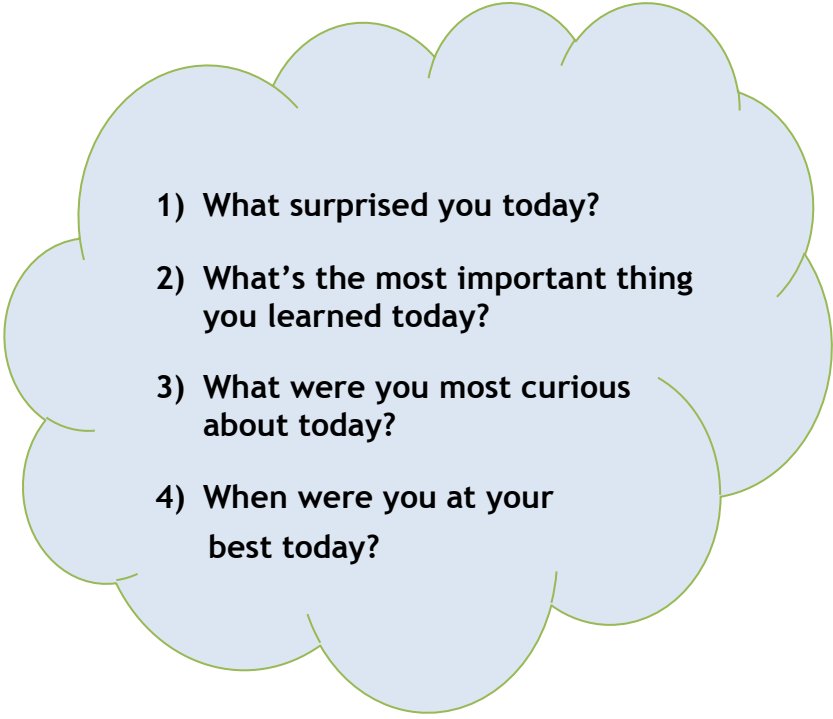
Step Three: Action Plan Implementation and Reflection

In-the-Moment Reflection using the Team Journal₈

In-the-Moment Reflection can be useful to track progress towards your goal, including reflections, successes and lessons learned along the way. This will help you to capture “in the moment learning” and can be used to summarize key results to share with other team members, leaders and other stakeholders.

Some Ideas:

- ✓ After each meeting, use the following questions to ask the team to reflect on their time together.
- ✓ Capture these ideas on a Flip Chart paper. Take a photo of the reflections or capture the team reflections in other creative ways.
- ✓ It may also be helpful to journal your experience in the accompanying team journal.

- 
- 1) What surprised you today?**
 - 2) What’s the most important thing you learned today?**
 - 3) What were you most curious about today?**
 - 4) When were you at your best today?**

Team Journal

Sample Team Reflections

Date:

Team Activity:

What surprised you today?

What's the most important thing you learned today?

What were you most curious about today?

When were you at your best today?

Step Four: Re-Assessment and Evaluation

Following the intervention period, the ACT Team Assessment survey can be re-completed for reflection and evaluation purposes. Upon completion of the full ACT process, please complete the ACT Evaluation Questionnaire on ACT Website (see Appendix).

The ACT Leads will conduct a final reflection session on progress and results of Team Action Plan. Ensure that you celebrate your successes and recognize changes in process and outcome. Long term goals, sustainability and opportunity to integrate changes into routine team practice should be discussed. Teams should look for opportunities to integrate successful and sustainable change into their daily workflow. Other goal creations, intervention cycles and further re-assessment/evaluation can be considered to build on and continue momentum of the Team Action Plan. Additionally the Team Assessment survey can be re-completed over time for future reflection, re-evaluation and see the team's change over time.

Additional resources regarding sustainability planning are available, on:
<http://www.hqontario.ca/Portals/0/Documents/qi/qi-sustainability-planner-instruction-sheet-and-tool-en.pdf>

Our hope is that teams will continue to value team reflection and competency development beyond the completion of the process. Consider opportunities to celebrate across teams and organizations in the form of team forums and communities of practices. These are excellent ways to ensure teams are sharing, celebrating, learning across teams are sharing, celebrating and learning together and can be a driver of sustainability, evaluation and scholarship.

Appendix A: ACT Resources

IPC Framework and Team Assessment Toolkit, ACT Team Assessment link, ACT Introduction Slide Deck, ACT Competency Activity Inventory, ACT Evaluation Questionnaire, and further information on train-the-trainer and professional development programs can be found on the ACT Website using the following link: <https://ipe.utoronto.ca/tools-resources/act-toolkit>

Appendix B: Acknowledgements:

Thank you to the TAHSN/CIPE Interprofessional Care Co-Chairs, Working Group Members, Executive Sponsors and Organizations that have contributed to this work. The ACT Toolkit was adapted from the Sunnybrook Health Sciences Centre Interprofessional Collaboration Assessment and Toolkit and competency activities were adapted from Centre for Interprofessional Education, TAHSN organizations. Special thank you to the pilot teams from Holland Bloorview Kids Rehabilitation Hospital, Michael Garron Hospital, Hospital for Sick Children, Trillium Health Partners, University Health Network, and Women's College Hospital that contributed to piloting and evaluation of the ACT Toolkit. Finally, thank you to Isabella Cheng and Lina Gagliardi for suggestions based on their Psychological Safety work at Sunnybrook Health Sciences Centre.

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