



REVIEW

Defining collaboration in Australian maternity care

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KEYWORDS

Interprofessional relations;
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Summary

Background: Within maternity services, collaboration between maternity care professionals appears problematic in spite of widespread support for collaborative practice amongst stakeholders.

Objective: The objective of this paper was to examine and to clarify what the key elements of interprofessional collaboration are and how they relate to maternity care in Australia.

Method: A review of the literature was performed to identify key characteristics of collaboration. All papers, theoretical and empirical, that discussed the concept of collaborative practice between professionals were considered.

Findings: Currently there are inconsistencies around the concept of collaboration in terms of definitions, characteristics and language. A comprehensive definition was developed that incorporates elements of collaboration suitable for the various professions involved in the provision of maternity care in Australia. The recently developed national criteria for 'collaborative arrangements' in maternity care, however, does not contain the elements of our proposed definition and may discourage collaboration between primary maternity care providers.

Conclusion: The proposed definition could be useful in further development of collaborative arrangements within maternity care and assist to further inform research on collaborative practice.

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Background

The Australian Federal Government is currently calling for 'collaborative arrangements' to be established between doctors and midwives to enable women to access Medicare rebates for midwifery care.¹ There seems to be fundamental differences, however, to how doctors and midwives interpret the meaning of collaboration. These differences are rein-

forced throughout the broader health care literature, which reports inconsistencies in how the term is applied and interpreted.² Therefore a consistent and universally applied definition and understanding of collaboration is required.

Objectives

This paper aims to identify and clarify key elements of interprofessional collaboration. Using the broader health care literature, we attempt to form a definition appropriate to maternity care. By doing so, it is hoped that maternity services can support collaborative arrangements that are beneficial to service providers and women accessing care.

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An appropriate and useful definition will also assist researchers to empirically establish the efficacy of collaboration in maternity care.

Many health care professionals provide maternity care services. Professionals may include paediatricians, nurses, physiotherapists, social workers, neonatologists, to name a few. This paper, however, refers to the primary maternity carers involved in universal services to pregnant and birthing women: obstetricians, general practitioners (GPs) and midwives.

Method

The literature review was conducted by searching the Scopus, Sage Premier, Business Source Premier, CINAHL, PubMed and MIDIRS databases for papers published within the last fifteen years. The following terms were used to attempt to identify articles that discussed the concept of collaboration: collab*, midwi*, matern*, health, care, interprofessional, profession*, discipline*. All papers, theoretical and empirical, that discussed the concept of collaborative practice between professionals were considered. A snowballing effect was also used, where references from key articles were used to identify other papers relevant to the aim of this study.

Findings: defining collaborative practice

Collaboration is broadly defined as working with others to produce a common output.^{3,4} Within the context of maternity care, this would be interpreted as: *maternity care professionals “working together” to produce a “common goal” of a healthy outcome for both women and babies.* This definition however does not elicit differing constructs or worldviews held by the professional groups (midwives and doctors) involved in maternity care. Therefore it is useful to explore the broader components of collaboration that may assist in explaining the current differing approaches to collaboration between doctors and midwives in Australia.

Professional status

Midwives and doctors are exposed to educational and professional experiences that can result in differing beliefs, values and worldviews when acting in their professional capacity.^{5–7} Informed by historical, financial and gender influences that have created professional hierarchies within health care systems, ‘turf wars’ and a lack of mutual respect and trust for each other has occurred.^{6,8–10} As a result, women may be disadvantaged by maternity care providers not working together effectively.^{8,11–13}

Trust and respect for decision-making and skills of others in a maternity care team evolves through understanding the perspectives of the various professions involved.^{14,15} Understanding and respecting the background of other professions also assists in disseminating professional hierarchies and competitive behaviours that may occur between maternity care providers.¹⁶ Such understanding allows utilisation of diverse backgrounds rather than focusing on changing the beliefs and values of other group members.^{6,13,17} Focusing on a common goal as part of a collaborative approach to care

also promotes utilisation of diverse backgrounds rather than a focus on differences between professionals.^{2,18}

Common goals—woman-centred care

Having a common goal can focus a non-cohesive group to cooperate in collaborative practice.^{2,18} In Australian maternity care, both midwives and obstetricians identify that care should be ‘woman-centred’.^{19,20} Woman-centred care has been defined as care that is tailored to provide best care for the individual woman and her baby, as well as other people that play an important role in the journey of her pregnancy and birth. This care is holistic, addressing all the woman’s needs (e.g. social, physical, and psychological) as required, where the woman is empowered to choose and make informed decisions about the type of care she receives.²¹ Focusing professionals to a woman-centred approach can eliminate barriers to the implementation and practice of collaboration.^{13,22}

This definition of woman-centred care requires maternity care providers to engage the woman as an equal contributor to decisions about her care.^{18,21} In health care, the information technology revolution has seen a shift from submissive patients to consumers with multiple information sources.¹⁸ Hence, women today prefer more input into their maternity care and are more willing to challenge the professional on their decisions and opinions.^{18,23,24}

Despite strong support by policy documents and claims by professionals to provide ‘woman-centred care’, the role of the patient or client in frameworks of collaborative models of care is often absent.^{2,21} Rather than focusing on the client contribution to the collaborative process, frameworks seem to focus on how health professionals interact with each other. For this reason, when defining collaboration in maternity care, the common goal of maternity care providers must include a genuine commitment to working with the woman to achieve optimal care.²⁵

To review the concepts discussed so far, collaborative care in maternity services should be extended beyond the definition earlier to: *involving maternity care professionals from multiple professions working together with the woman to produce quality outcomes. All involved trust, respect and understand each others’ approach to practice which utilises knowledge and expertise from the various professions involved.*

Inconsistent terms and language

Key terms within the literature regarding collaboration are often interchanged inappropriately and contribute to the inconsistencies in defining collaboration. Examples include *interdisciplinary* or *interprofessional*, the level in which professionals work together (multiprofessional, interprofessional or transprofessional), and interchangeable use of coordination, cooperation and collaboration.

Discipline is defined as a “demarcated body of knowledge”²⁶ or “field of study”.²⁵ Alternatively, a profession is an occupation that requires special knowledge that may be across several disciplines.^{25,27} Hence, when referring to collaboration in a work place, as we are in this paper, the reference to a profession rather than their discipline is appropriate.

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