

PARTNERSHIPS OF THE FUTURE

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OBJECTIVES: *To explore how partnerships among private, nonprofit, and public organizations can be instrumental in addressing 21st century health care challenges.*

DATA SOURCES: *Peer-reviewed studies and guidelines, journal articles, books, websites, and personal communication.*

CONCLUSION: *Given the complexity of the health care environment and the need to transform the system, individuals and organizations will need to form partnerships that result in improved quality of care and decreased cost. Some recent initiatives have been successful and are included in this article.*

IMPLICATIONS FOR NURSING PRACTICE: *In many communities and at the national level, there are agencies and organizations that are working independently, yet they have overlapping goals and the same intent. They compete for the same financial and human resources whether in academia, the care delivery sector, or non-profit associations. In the cancer care world, interprofessional teams are essential, yet much care is still delivered in silos. There are redundant patient advocacy organizations even for some of the less common cancers. Partnerships and collaboration will take new forms and require new skill sets in the future.*

KEY WORDS: *Interprofessional, collaboration, partnership, coalition, alliance, cancer care.*

Coming together is a beginning.
Keeping together is progress.
Working together is success.

Henry Ford

The 21st century has brought increased partnerships, collaborations, and integration of organizations in the health care ecosystem, domestically and internationally. Solo

health care providers are becoming increasingly rare as groups of providers now become the norm. Health care systems are expanding their reach not only within their geographic region but nationally and internationally through collaborative agreements and mergers and acquisitions. Research is not only team-based but now the team members may reside in different, and even competitive, organizations. The collaboration between academic settings and care delivery settings, long proposed in the literature, is taking place not only in discipline specific formats but across disciplines in some locations. Patient advocate groups, professional member associations, payers, and industry now more readily share health policy agenda priorities and lobby together. This scenario describes the world of cancer care today.

The siloed approach of the past to solve societal challenges is not effective today and thus, partnerships

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among private, nonprofit, and public organizations are needed to solve 21st century problems.¹ Competition among organizations has not disappeared. However, there is a greater recognition that the health care world is highly interrelated and achieving the triple aim of health care reform will require new skills and levels of collaboration. Given the 24 hours per day 7 days per week real-time connectivity, individuals and organizations can easily work together anytime and anywhere. This connectivity has also increased the opportunities for global partnerships. A number of key factors will continue to motivate organizations to collaborate, coordinate, and merge: the complexity of the health care environment, the pressures in the political and economic environment, knowledge specialization, technology, and declining resource availability.² Yet, duplication and redundancy in the advocacy and professional member associations not only exists, but has continued to expand. Not only are coalitions often populated with the same agency or organization representatives, but there is overlap and redundancy of coalitions. A question for the future is how these relationships might change to mobilize and harness existing resources leading to better outcomes. Partnerships can have benefits for all parties but also can be challenging to formalize and operate.

In the cancer care environment, there are many examples of successful team-based research and care delivery approaches. Yet several Institute of Medicine (IOM) reports identify that well-coordinated interprofessional teams are a needed solution to the complex clinical challenges ahead. These challenges include the future workforce and the pipeline of diagnosis and treatment discoveries coupled with the unrelenting financial burden on patients. Oncology nurses are central to finding solutions to complex issues in health care but oncology nurses may not currently exert as much influence on these collaborations as they should to shape the future. Collaborations begin at the individual level and expand to organizations and professions. Understanding the conditions/elements of effective collaboration and partnerships and exploring current examples in health care delivery, research, advocacy, and education/professional development are the focus of this article.

COLLABORATION AND PARTNERSHIP

Although the words *collaboration* and *partnership* may be used interchangeably, the terms are

not the same.³ *Collaboration* is the process of working together for a mutual goal. *Partnership* is also a process of working together but includes shared risk and reward. Another term commonly used to define a relationship between organizations is *alliance*. Further distinguished as strategic or social, like collaborations and partnerships, alliances serve the needs of both (or several) organizations. Strategic alliances advance economic or political agendas or priorities. Social alliances are characterized as having both for-profit and nonprofit organizations in the relationship and will have non-economic objectives.⁴

Whether a collaboration, partnership, or alliance, not all of them are alike. Some may be complex, long-term, or temporary. There may be differences in the assets that each organization brings to the relationship. Regardless of the complexity or longevity of the relationship, from the beginning the organizations must have a clear understanding of the purpose and why they want to work together.

Building a relationship between and among organizations requires trust, respect, and commitment among the parties. A clearly defined statement of purpose is critical and must be endorsed by all parties. Based on that purpose statement, goals should be established that are obtainable and measurable. Acknowledgement and credit of all the participating groups should be consistent to avoid conflict and distrust. A clear outline of the assets or resources each group is expected to contribute and with what frequency should be decided early. Having an understanding of the advantages and disadvantages of collaborations and partnerships helps an organization's leaders make decisions about these opportunities (Table 1). The bottom line is that transparency and mutual benefit must exist for collaborations and partnerships to be truly effective.

INTERPROFESSIONAL EDUCATION AND PROFESSIONAL DEVELOPMENT

Collaboration, partnerships, and alliances each require interpersonal and interprofessional skills that can be learned and developed. Hasmyler and Goodman⁵ note that the committee that prepared the 2010 IOM report, *The Future of Nursing: Leading Change, Advancing Health* envisioned a future in which interprofessional collaboration and

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