Inter-professional Working and the Service User Perspective in Prescribing Practice

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Aims

- Critique the Notion of Inter-professional Working in Practice.

- Discuss the implications of research for inter-professional working in your own practice.

- Consider aspects of your practice which promote and inhibit service user participation

Towards Inter-professional Working

- The Change in the Context of Practice

- From Expert Practice to the Fluid Unpredictability of Care Settings

- "The Nature of the Work Itself" (Boud, 2010:31)

- The Myth of Autonomous Practice

- Acknowledging the Perspectives of Others

- Trans-disciplinary Practice

- Service User Participation

(Boud, 2010; Hudson, 2007; Reed,2011)

Barriers to Inter- professional Working

(Wenger, 1999; Cameron, 2011)

Consider Another Professional Discipline and Ask Yourself

- What is their professional epistemology?

- How is competence achieved?

- What are their knowledge and skill boundaries?

- What are the disciplines which most often share practice overlap?

- Protocol versus professional knowledge

Examples of Inter-professional Working- Pharmacist Feedback on Prescribing Errors (Lloyd et al, 2018)

- History of correction without contact or interaction
- Pharmacists hesitant on grounds of sensitivity
- Prescribers highly valued feedback
- 18 pharmacists gave confidential individual feedback on errors
- Semi-structured interviews with participants
- Digitally recorded and transcribed verbatim
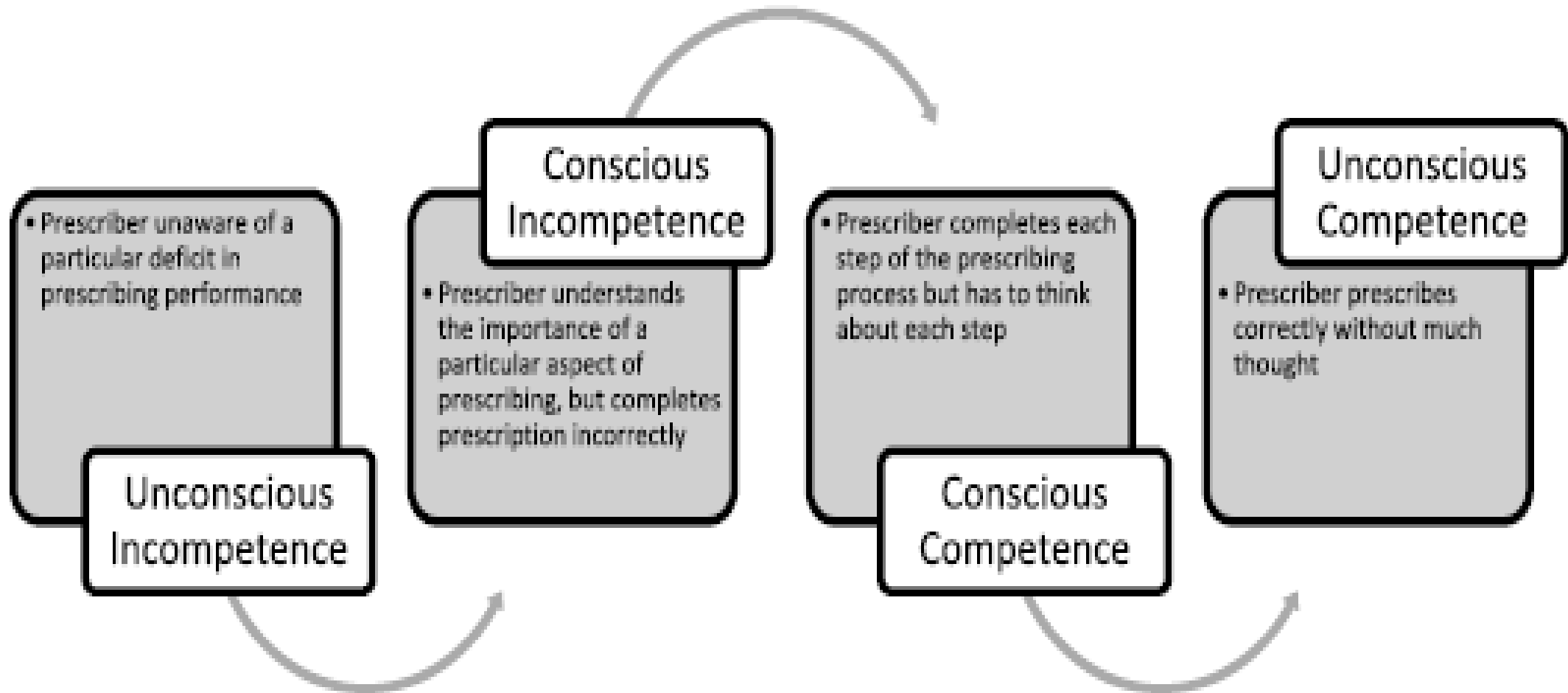- Analysed using Ritchie and Spencer's Thematic Framework

Examples of Inter-professional Working- Pharmacist Feedback on Prescribing Errors- The Results

(Lloyd et al, 2018)

- From Directive or Facilitative

- Sensitivity Honed and Dialogue Improved

- Cost Effective

- Improved Relationship with Prescribers

- Knowledge Exchange Mutually Beneficial

- Realisation of 0wn Professional Value

- Raising Practice Standards

Improving the Prescribing Process (Lloyd et al, 2018)

Unconscious Incompetence
- Prescriber unaware of a particular deficit in prescribing performance

Conscious Incompetence
- Prescriber understands the importance of a particular aspect of prescribing, but completes prescription incorrectly

Conscious Competence
- Prescriber completes each step of the prescribing process but has to think about each step

Unconscious Competence
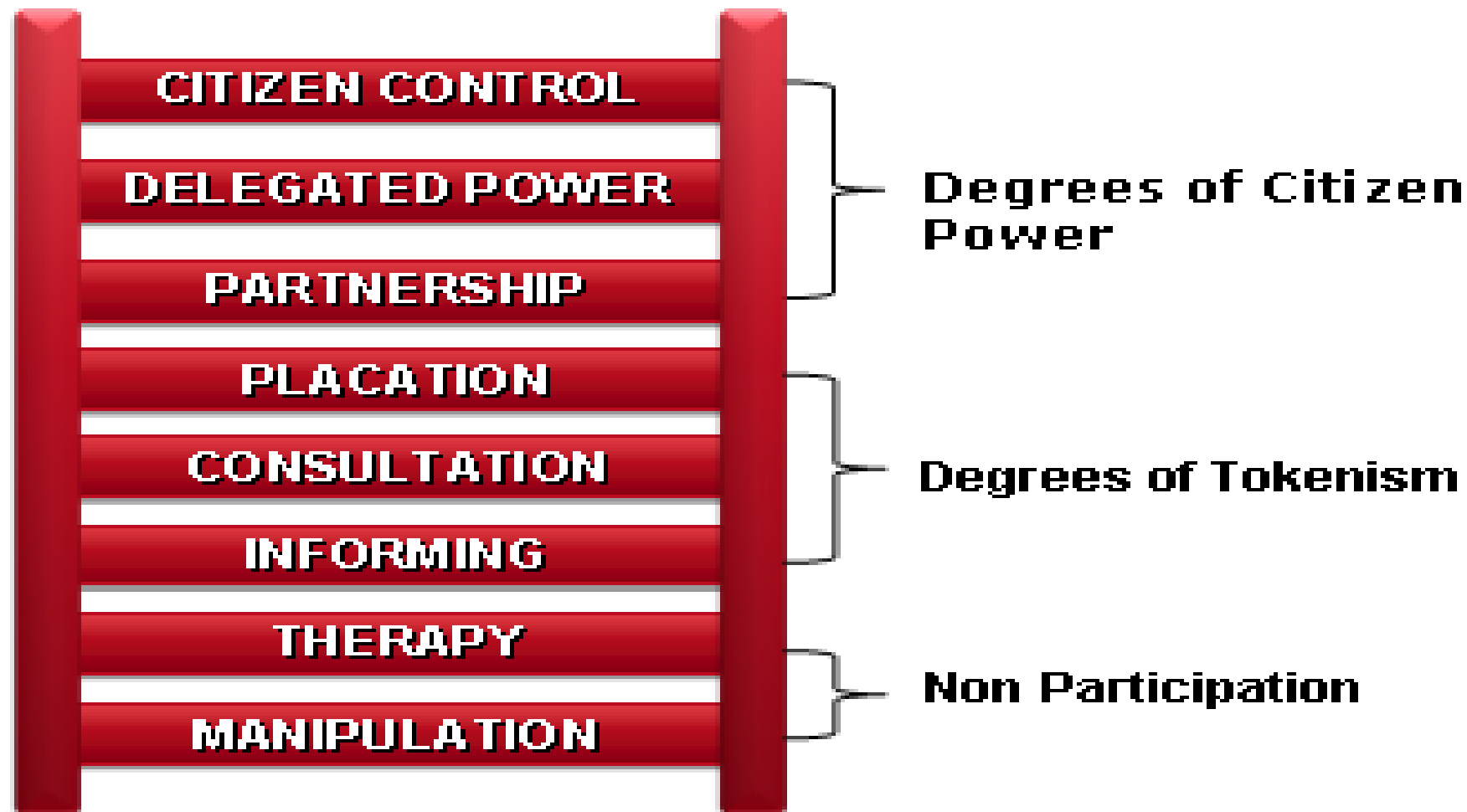- Prescriber prescribes correctly without much thought

The Service User Perspective

(Coulter and Collins, 2011)

- The Sociology of Empowerment
- Uncertainty and Redundant Paternalism.
- A Range of Practitioner Excuses   Service Faults and Deficits and Transferring Blame
- Systems and Approaches

The Ladder of Participation in Practice

- Tokenism (Celino et al, 2005 ; Jacobowski et al.)

- The Chief Patient Complaint (Coulter and Collins, 2011)

- Lip Service and Tokenism

  (Millard et al, 2006 ; Oudshoorn, 2007)

- Readiness to Listen, Support Expression, Take Account, Involve and Share

  (Shier, 2001)

- Representativeness

- Accessing the Skills Escalator and Funding

Exploring your practice – Ask Yourself

- How does listening to service users feature in your practice?

- What efforts are made to help service users express themselves?

- How do you take account of the views and feedback from service users? How do systems reflect this?

- How are service users involved in clinical decision making?

thank you!