



# Team Agreement 2021

February 25, 2021

## Maternity Team Processes:

1. Team Agreement
  - a. To clarify our values and guide how we work together as a team.
  - b. Agreed on unanimously and signed by all team members.
  - c. Reviewed and updated when any member joins or leaves the team. New members would be considered to join permanently after a 6-month trial period.
2. Sharing of patient care
  - a. Patient care will be shared equally among providers, unless a different agreement has been made unanimously by the team.
  - b. Team members will collaborate with all members equally.
  - c. When a patient requests certain provider(s), all Team Members will give a consistent message about our shared care model and explain that requests will only be entertained after the patient has met all of the providers. If all providers have met the patient and the request persists, the Team will discuss at a handover meeting how to proceed.
3. Call
  - a. The call schedule will be made by Pam at the clinic. Once the schedule is made and agreed on, any changes are the responsibility of the Team Member.
  - b. On-call shifts will start at 8am on Mondays for 7 days, except when Monday is a statutory holiday, when handover will happen on Tuesday morning.
  - c. The on-call provider of the week will act as the maternity Team Lead for any issues arising during their call shift.
4. Second On-call
  - a. Second On-call will be available to be a second provider at deliveries when required for patient care or for coaching purposes. The Second On-call will also attend home births when Joyce is first call.
  - b. The Second On-call schedule will be made by each team member signing up for weeks that they are available or prefer to be on-call. It is the responsibility of the Second On-call to find a replacement if they will be unavailable for a period of time during their weeks.
  - c. These weeks do not have to be shared exactly evenly like the main call schedule, as long as all providers feels good about the amount of second on-call they are doing.
5. Maternity Team Lead
  - a. Will facilitate discussions with other staff in the case of concerns or miscommunications around patient care or other processes.
  - b. The Team Lead will ask for another provider to become involved for support as required.



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6. Handover
  - a. Handover will occur Monday mornings (Tuesdays after a stat) and be organized by the outgoing provider. The outgoing and incoming providers will attend handover, and additional team members according to their availability.
  - b. The patient list will be updated by the outgoing provider and given to the prenatal nurse to type and forward to the incoming provider. The nurse will also provide an updated version of the list leaving out the history (right column) to the Patient Care Coordinator on Mondays.
  
7. Operations Discussions
  - a. Operations issues will be discussed at these meetings after handover. Larger scope issues will be deferred to longer Check-In Meetings.
  - b. Team members will be accountable to Action Items identified in the meetings.
  - c. Team will identify evaluation timeline and measures when changes are implemented.
  - d. A summary of operation items discussed will be kept by the maternity nurse who will update our team process documents as necessary.
  
8. Team Check-in Meetings
  - a. All providers will attend 2-3 meetings per year, beginning Feb 2021. The following meeting will be scheduled at the meeting prior. Providers will rotate preparing meeting agenda and taking minutes.
  - b. Round Table Discussion will take place at each meeting to give every team member an opportunity to discuss what is working and not working.
  - c. These meetings will also include social, relationship-building time.
  
9. New Team Member Orientation
  - a. New providers will phone the Second On-call when admitting a patient in labour and have that provider attend deliveries with them for the first 3-6 months. The goal of this is not to supervise or confirm competency but to promote team-building, a culture of coaching and feedback, and communication for the broader maternity team.
  - b. New providers will have a six-month trial period before joining the team as a permanent member. There will be a check-in with the team at 3 and 6 months to have opportunity for feedback and discussion in both directions. The 6 month check-in meeting will include renewing our Team Agreement as a new group.
  
10. Postpartum care and home visits
  - a. Home visits will be offered to all patients in the first week postpartum by the delivering provider. If the delivering provider does not have capacity, they will arrange for another provider to offer the home visit(s).
  - b. Providers will protect time in their schedule the week following their on-call to accommodate these visits.



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## 11. Communication with other healthcare professionals

- a. Team members will apply the guiding values of collaboration, respect, shared philosophy of patient care, and equity and fairness when communicating with other team members.
- b. In the case of conflict or misunderstandings, we will apply curiosity, include the care provider in question in any discussions, and if necessary, involve the maternity Team Lead, Patient Care Coordinator and/or manager as necessary.
- c. Use MoreOB debriefs to review labour and delivery cases and address questions about decisions from patients and staff, including the patient in the discussion whenever possible.

## 12. Feedback

- a. Giving and receiving feedback and support is integral to the Golden Maternity Team. It aligns with our values (collaboration, respect, shared philosophy of patient care, and equity and fairness) as well as our three goals (to provide excellent clinical care, to feel fulfilled and supported in our work, and to advocate for a system that supports clinical excellence).
- b. Feedback is supported by the coaching funding through ROAM for a second provider to attend deliveries. ROAM project lead will email the maternity team 2 times a month to track 2nd on-call coaching opportunities and sessional payments (until 2023).
- c. UBC/CAMP Coach training and Skills Development sessions are available; ROAM project lead will email team with dates (until 2023).

## 13. Billing

- a. All team members are required to be part of the Golden Medical Clinic and enter into contracts as per the GMC.
- b. All team members will participate in the same billing model as detailed in the Billing Process Document.

## 14. Continuing education

- a. **All providers will maintain up to date NRP certification (every two years) and to participate in MoreOB, fetal health surveillance, ALARM?**