

Multidisciplinary Team Culture - Customer/Patient/Client/Human

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The Sue Ryder Home



Context

- Growing number of people with high complexity of needs
- Increasing complexity of needs can be effectively addressed through interdisciplinary team work.
- Multi-, Inter-, Trans- disciplinary can be used as
 - Continuum of collaboration
 - **Interchangeable expression** (*MDT*)




Definition of Team


- Team (Mohman in Borril et al., 2000)
 - group of individuals
 - working together to meet a particular goal or goals
 - own group dynamics – own culture, rules...
 - Interdependent relationships between members
 - member's role, sometimes even multiple
 - shared identity
 - shared decision-making
 - joint responsibility for the fulfillment of the goals or tasks



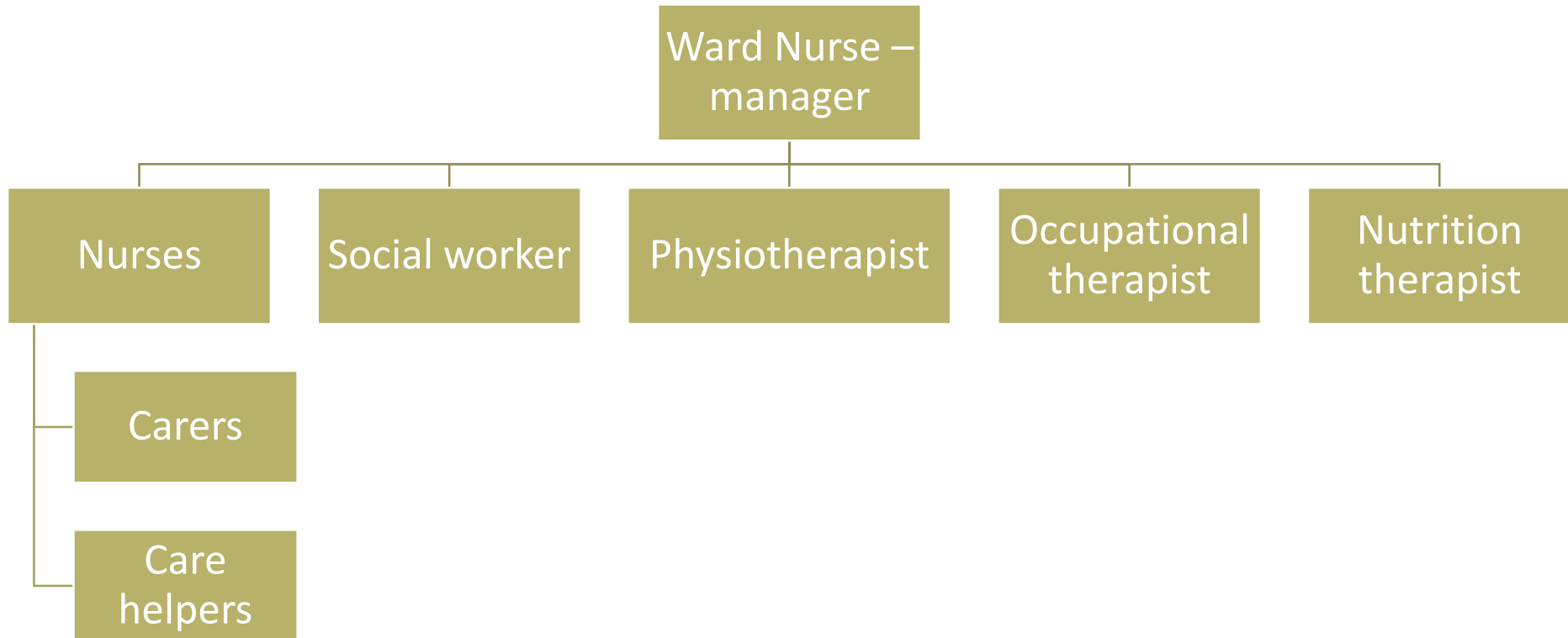
Multidisciplinary Team (MDT)

- Multidisciplinary cooperation exists if two or more social and health professions work together in a team (Booth et al., 2008, p. 8)
 - Exists within context of broader organizational context (Tyler, Parker, 2011), more teams in one organization (not necessary MDTs)
 - Integration of MDT approach has positive effect on quality of care provided (Nancarow, 2015)
 - ***Thesis: Quality of life is the MDT common goal. Human Centered Approach provides guidance to specify the goal for individual cases.***
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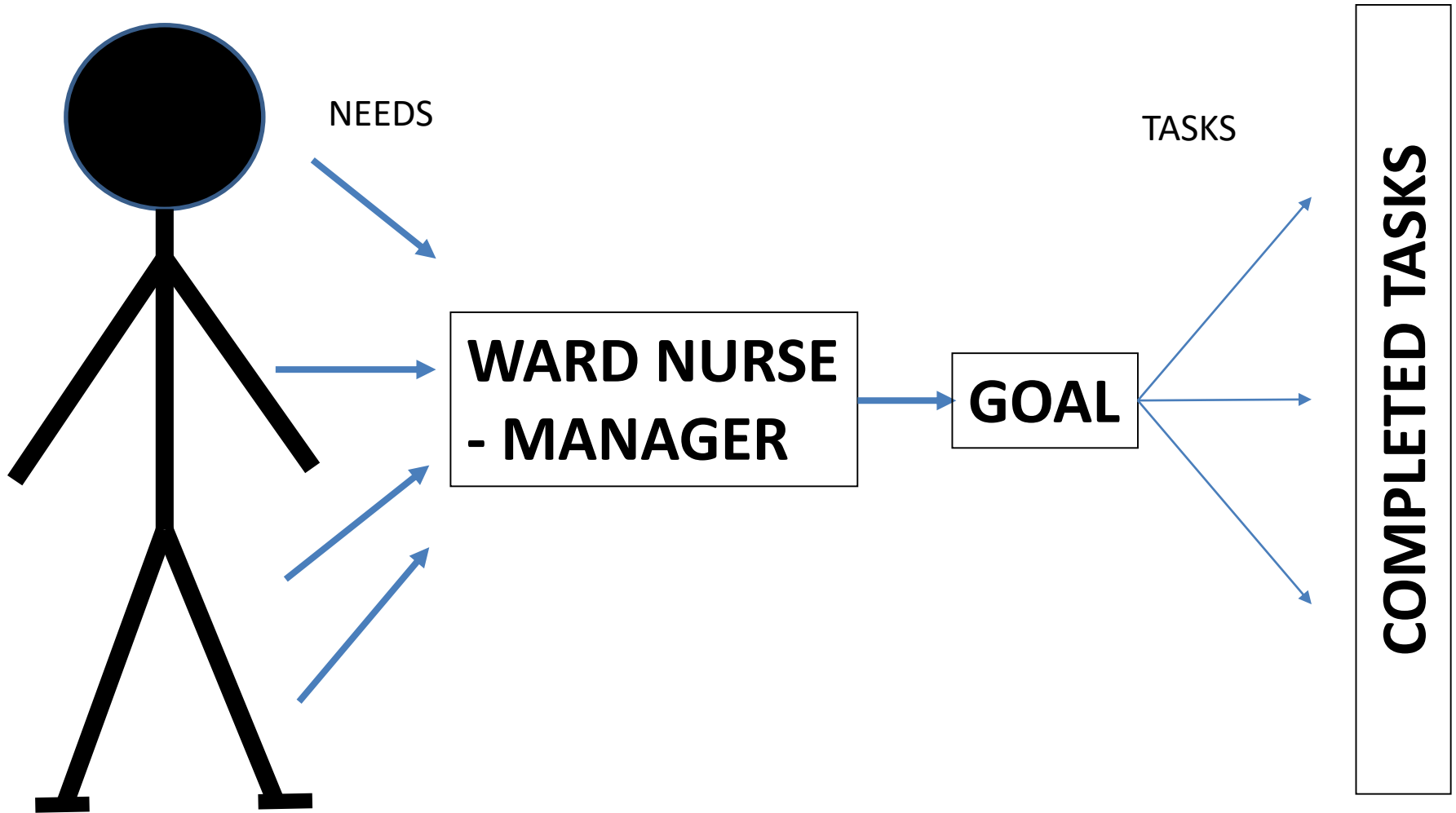
Case: Sue Ryder Nursing Home

- Residential LTC centre – social service
 - Capacity: 52 residents, av. age 87, 5; median length of stay 1,3
 - 74% cognitive impairment; 46% middle or late stage of dementia
 - 66% 3rd, 4th grade of care allowance – high dependency
 - Residents with geriatric frailty syndrome, multimorbidity
 - No permanent doctor service
 - Strict distinction between health and social sector (different ministries, different legislation, no specific LTC legislation)
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Original MDT architecture

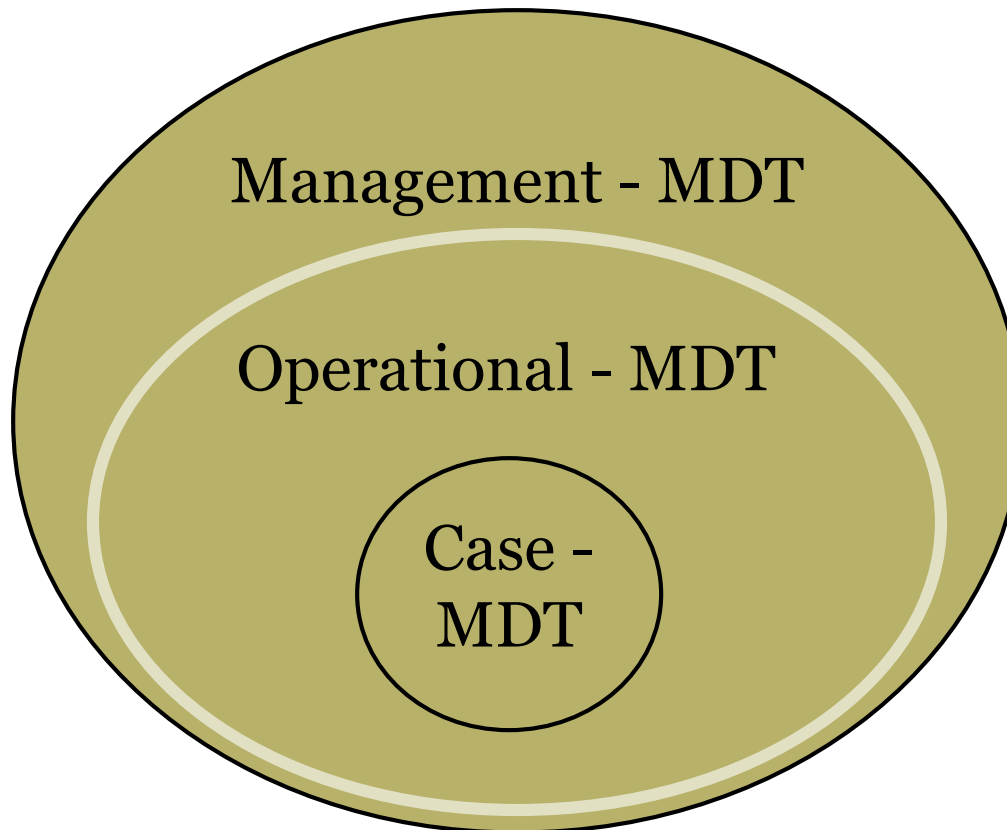


GOAL OWNERSHIP I.

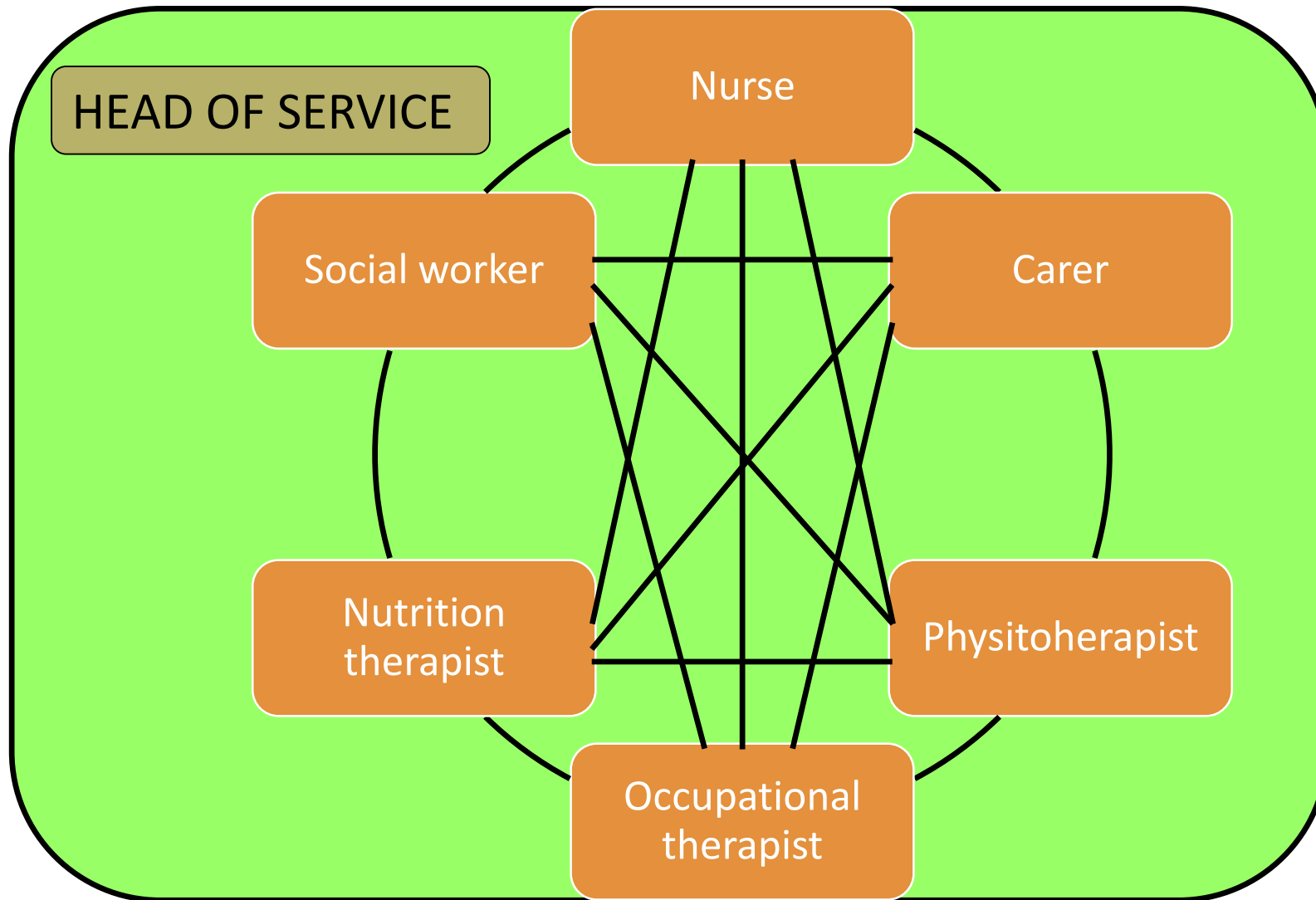


Different forms of a multidisciplinary team

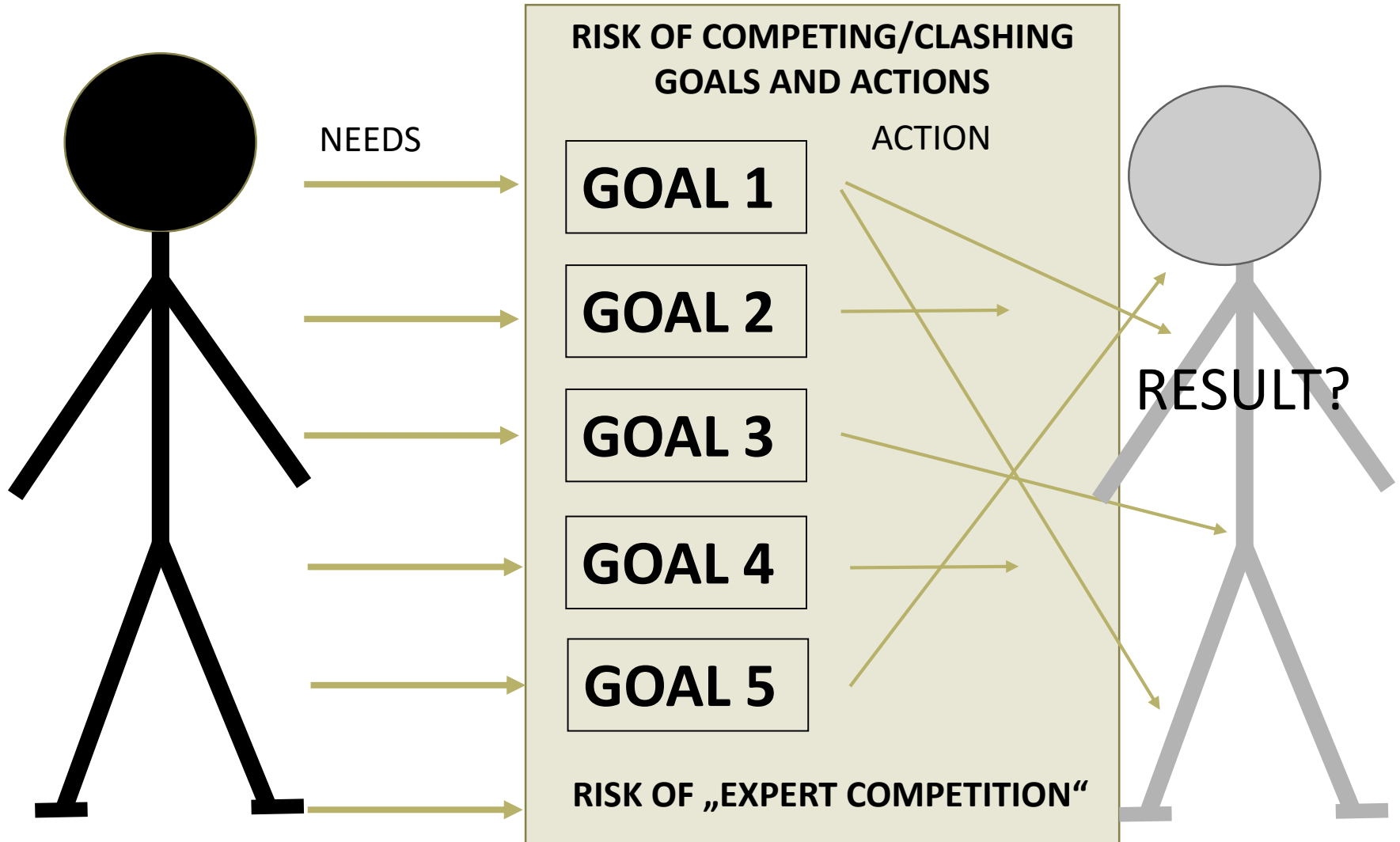
- Context of a care home – different goals, different arrangements of multidisciplinary team



MDT architecture II.



GOAL OWNERSHIP II.



Challenges Reported

- intensive inter-professional communication
- lack of strong decision maker
- burden of responsibility for „my opinion“
- Communication – dialog, discussion, shared terminology
- much more discussions and conflict about small issues
- Each team members leadership skills (facilitaion)
- Adequate structures for the team (meetings, info-sharing, team-development etc.)




Benefits of MDT reported

- Sharing and celebrating successful end-of-life cases
- Great experience of mutual understanding
- Mutual listening
- Distinction between dialogue and discussion
- Mutual trust increased
- Increased trust in relationships with families

- Explicit confirmation of shared goal and attitude:

There is not a client, a customer, a resident, a patient. There is a man and human dignity in our focus.



Sources

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COME ON!