

# Assessing Needs of Interdisciplinary Teams: A Case Study in Critical Care

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## 1 BACKGROUND

- Inter-disciplinary teams (IDT) are playing an increasing role in Canadian healthcare
- The needs of such teams are distinct and require explicit assessment to determine how IDT processes and outcomes can be improved
- The needs of teams functioning in less densely populated regions are also distinct and require explicit assessment

## 2 RESEARCH OBJECTIVES

- To increase our understanding of the context, the successes and challenges, as well as the professional development needs of critical care IDT of three hospitals of a rural region of Quebec
- To propose solutions to optimize critical care for that region

## 3 METHODS AND SAMPLE

IDT EDUCATIONAL NEEDS ASSESSMENT CASE STUDY APPROACH QUALITATIVE DATA COLLECTION						
HOSPITAL	DISCUSSION Group A	DISCUSSION Group B		INDIVIDUAL INTERVIEWS		TOTALS
	CRITICAL CARE PHYSICIANS	NURSES	RESPIRATORY THERAPISTS	INTERNISTS	PHARMACISTS	
H1	3	10	1	1	2	17
H2	7	9	2	2	2	22
H3	4	9	2	1	2	18
Totals	14	28	5	4	6	n = 57

## 4 CHALLENGES AND BARRIERS

### A Roles and responsibilities

- Nurses are responsible for tasks of respiratory therapists, nurses' aids, and orderlies
- Unnecessary variation in the roles and responsibilities of IDT members depending on team composition

### B Teamwork and communication

- Level of teamwork varying heavily depending on who is involved
- Lack of leadership
- Communication pathways perceived as sub-optimal
- Medical equipment moved without sufficient notice and therefore not available when and where needed
- Administration perceived as detached from the clinical reality

### C Inter-institutional transfers

- Heavy administrative burden associated with transfers
- Staff's absence not compensated for when they accompany patient during transfer

### D Professional education

- Difficulty in maintaining competency for rare cases due to insufficient exposure
- Lack of professional education programs being offered
- Lack of freedom from workload to participate in professional education
- Formation and integration of new staff perceived as insufficient

## 5 PROPOSED SOLUTIONS

PILOT PROJECT – ORGANIZATIONAL AND EDUCATIONAL SOLUTIONS				
COMPONENT	A Roles and responsibilities	B Teamwork & communication	C Transfers	D Professional education
GOAL	Clarify IDT members' roles and responsibilities	Improve communication and teamwork among IDT	Improve efficiency of transfers	Provide continuous education
ACTION PLAN	<ul style="list-style-type: none"><li>■ Structured discussion groups based on clinical scenarios</li><li>■ System interventions</li><li>■ Clinical tools</li><li>■ Educational Interventions</li></ul>	<ul style="list-style-type: none"><li>■ Structured discussion groups based on clinical scenarios</li><li>■ Communication tools</li><li>■ Educational interventions</li></ul>	<ul style="list-style-type: none"><li>■ Information sharing tools between centers</li><li>■ Standardization of procedures between centers</li><li>■ Procedure to replace staff who accompany patients on transfers</li></ul>	<ul style="list-style-type: none"><li>■ Decentralized model</li><li>■ Regional involvement in development of educational tools and materials</li><li>■ Input from the professionals to further adapt educational plan</li></ul>
Deployment of the interventions: September – October 2010				
Evaluation of the interventions: September 2010 – April 2011				
Presentation of the results: May – June 2011				

## 6 CONCLUSIONS

- This approach to evaluate IDTs has allowed a comprehensive assessment of challenges and needs from multiple perspectives.
- Identified contextual issues and organizational challenges of IDTs have informed optimization of the value and impact of a future educational and organizational intervention