

UNSW research centre for primary health care and equity

Teamwork between disciplines and across boundaries – how it works in practices?

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Aims

The specific objectives of the study are:

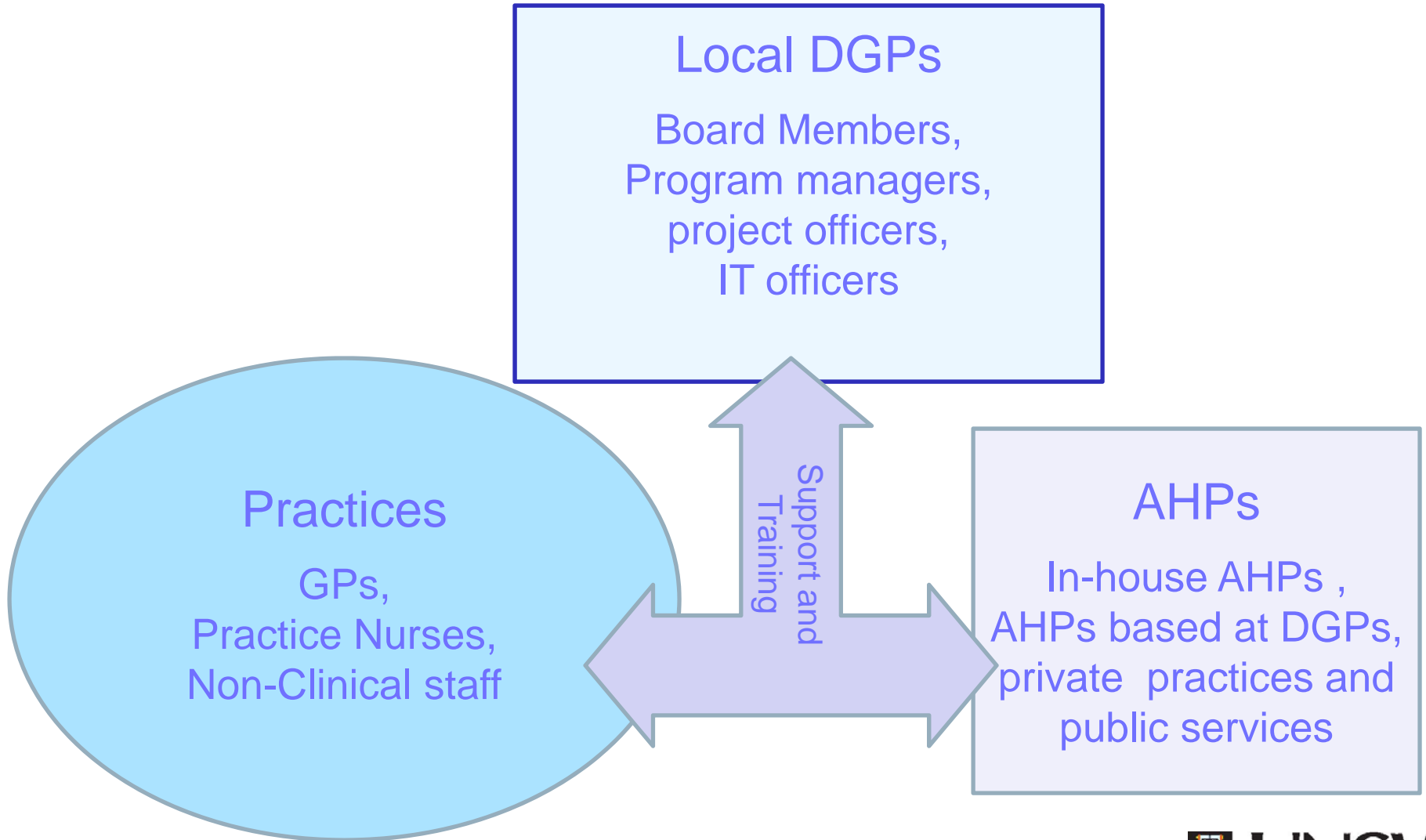
- To design a practice-based intervention to improve multidisciplinary teamwork **within general practices and between practices and other services** (by allied health professionals)
- To evaluate the impact of this intervention on the quality of care for patients with **diabetes, ischaemic heart disease and hypertension**

Research Participants

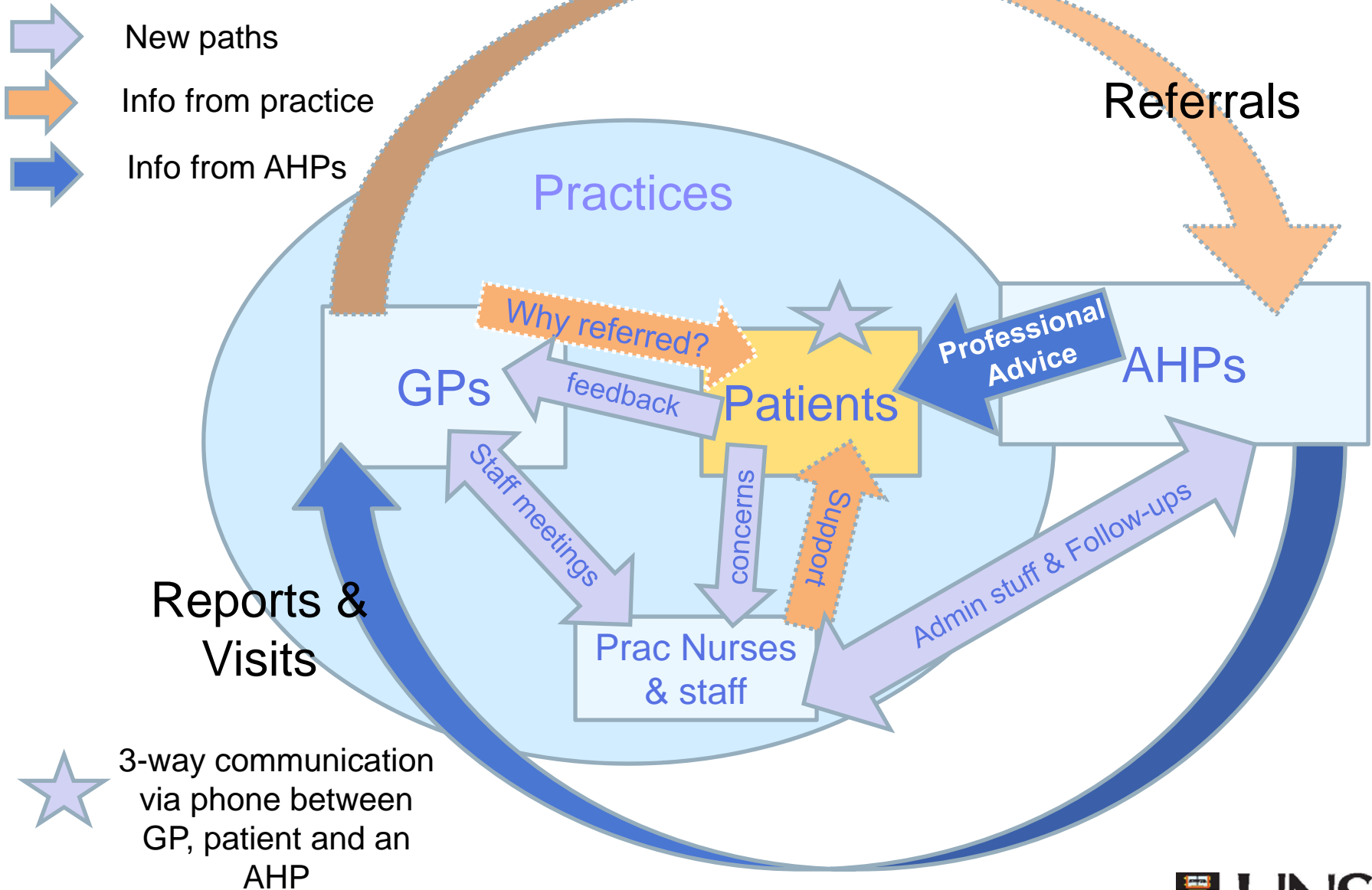
GP	35
Nurse	7
Receptionist	26
Practice Manager	9
Diabetes Educator	3 (8%)
Dietician	10 (26%)
Ex Physiologist	5 (13%)
Incontinence Nurse	1(3%)
Physiotherapist	4 (10%)
Podiatrist	13 (33%)
Psychologist	4 (10%)
Occupation Rx	1 (3%)
AHPs Sub-total	39/41*

* Average Response Rate = 31% (Two of the Dieticians were also Ex Physiologists)

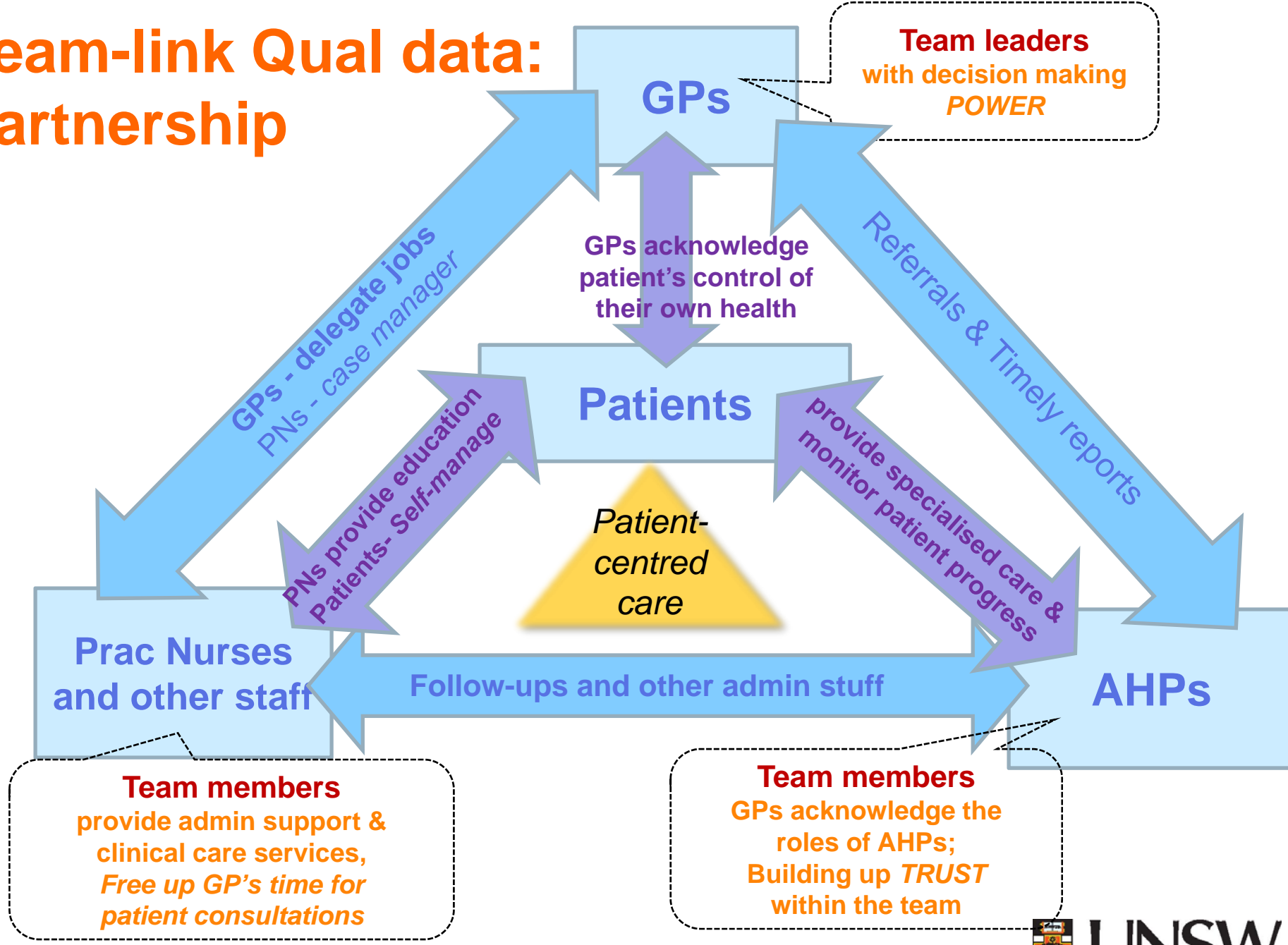
QUAL Data: Organisational Collaboration



Team-link Qual data : Communication



Team-link Qual data: Partnership



Where does TRUST (sharing) start?

At the beginning **GP** did not entirely **trust** allied health professionals (dieticians) to treat the patient as he wanted them treated, so he was doing all the work himself. **Now he is using Division's dieticians and can see the value of their participation.**

(Macathur)

Most benefit was opportunity to interact with AHPs and find out what they need from us and what they can do for us and our patients to improve patient health.
(Small Group Learning Central)

The more contact with the referring Dr the more they (GPs) realise that AHPs play an integral role in the management of their patients in a positive way. **The professional relationship takes time to build up, usually relies on the GPs to initiate the process.** (AHP Survey).



Who holds the POWER?

GP knows his patients idiosyncrasies and will pick an AH professional that deals with the individual needs of his patients.
(Macathur)

Developing educational strategies for patients in self-management. GP is keen in supplying education on lifestyle changes for his patients in relation to their chronic conditions (SW Syd).

I think it is more important to have a relationship with the doctor than the practice nurse as it is the Dr who has the decision making power regarding treatment
(AHP Survey).

How to establish PARTNERSHIP?

GP ... is getting feedback from patients saying they are happy with the AHP they had seen, and this is how he finds out if they have been sent to the right AH person (Macarthur).

*GP suggested regular internal group meetings in the future will be helpful for them to **strengthen the exchange of ideas within the internal team** (SW Syd).*

*The management of chronic disease depends on the **patient moving in and out of the various layers of the health system easily** (AHP Survey).*

Core concepts of inter-professional collaboration

(D'Amour et al 2005) Within the Team-link Intervention Process

Power

Maintain status quo

Sharing

*Need to establish personal
relationship and trust*

Interdependency

Understand values and
roles of Team Members