


Interdisciplinary Collaboration in ICU

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Aims

- ▶ Presentation of qualitative study results
- ▶ Group discussion – barriers and strategies
- ▶ Research evidence

Research study

- ▶ An Exploratory Study of Physiotherapists Views of Early Rehabilitation in Critically Ill Patients
 - ▶ Aim – To explore physiotherapists understanding and experience of early rehabilitation in critically ill patients
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Background

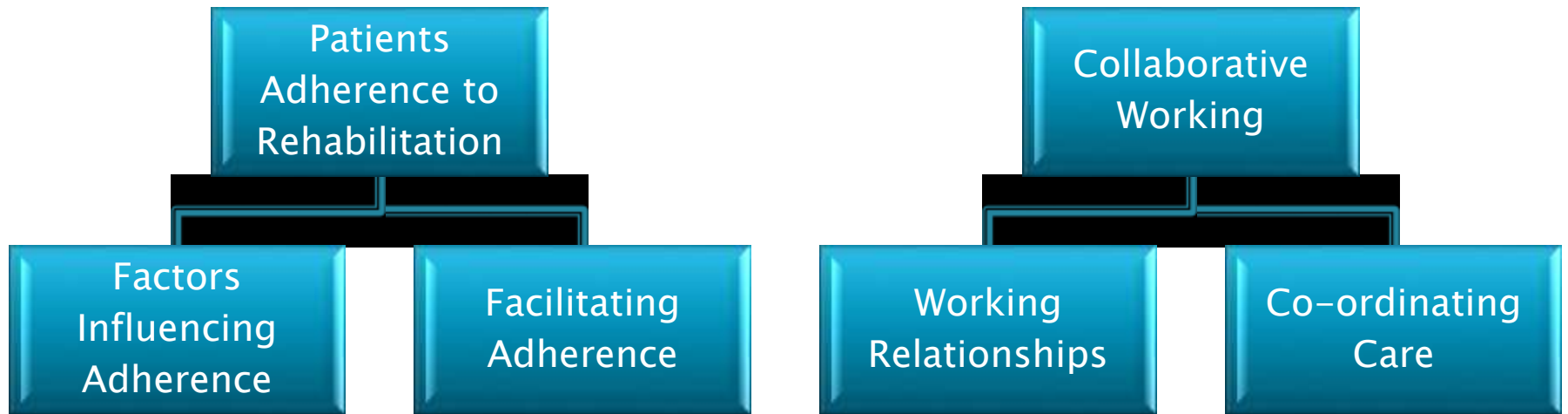
- ▶ Survival from critical illness is considered a major public health issue ⁽¹⁾
- ▶ Issues – physical limitations, cognitive impairments and psychosocial issues ⁽²⁻⁵⁾
- ▶ Impact – ↓ HRQoL ⁽⁶⁻¹⁰⁾, ↑ healthcare costs ⁽¹¹⁻¹²⁾
- ▶ Rehabilitation key ↓ long-term issues^(3, 13-14)
- ▶ Limited evidence ⁽¹⁵⁻²⁰⁾
- ▶ Surveys of clinical practice ⁽²¹⁻²⁵⁾
- ▶ No qualitative enquiry into Physiotherapists views

Method

- ▶ Participants – 6 female physiotherapists from 1 Hospital Trust with different levels of post qualification experience
- ▶ Semi-structured interview design
- ▶ Thematic content analysis

Results

- ▶ Conceptualisation of early rehabilitation
- ▶ 2 themes



Working Relationships

“the third person tends to be the nurse looking after that patient which it is useful because ... they will usually take lines watch the vent tubing for us ...it’s good to have that extra person there who’s been with them for the last six seven hours” (IP1)

“if we help them, they help us, so it does work both ways even though it’s not in their job description to help us and it’s not in ours to do that but it’s all part of the MDT and that’s what you need to do for patient care”(IP2)

Working Relationships

“Sometimes they (nursing staff) can be a bit ... over cautious sometimes, obviously we don't want to do anything that's not right for the patient, or if they're just busy and maybe they just don't want to help” (IP5)

“Education to the nurses of our role and why we're trying to do it (early rehabilitation) might help with some of the nurses who are set on keeping the patients a bit more still and um not moving as much” (IP3)

Coordinating Care

“we’ll each try to accommodate each other ... we’ll try in the morning to find out what the plans are for the patient in the day and if there is any way that we can co-ordinate our visit with what ties in with the nurses” (IP1)

“I think we’d get a lot more refusals or declines if we didn’t work so well with the nursing staff” (IP2)

Interdisciplinary Collaboration

- ▶ “Collaboration promotes and optimises active participation of all healthcare professionals in clinical decision making focusing on patient needs while ensuring respect for team member contributions” (Herbert, 2005)

Interdisciplinary Collaboration

- ▶ Interdisciplinary collaboration is essential in ICU environments ²⁶⁻²⁸
- ▶ Promotes a culture of safety ^{28, 29}
- ▶ Improves outcomes – ↓ mortality, LOS, staff turnover, ↑ quality of care & patient satisfaction ^{28, 29}
- ▶ Implementation suboptimal or inconsistent ²⁶

Group Discussions

- ▶ Discuss barriers to collaboration in your units.
- ▶ What strategies can be implemented to improve collaboration?

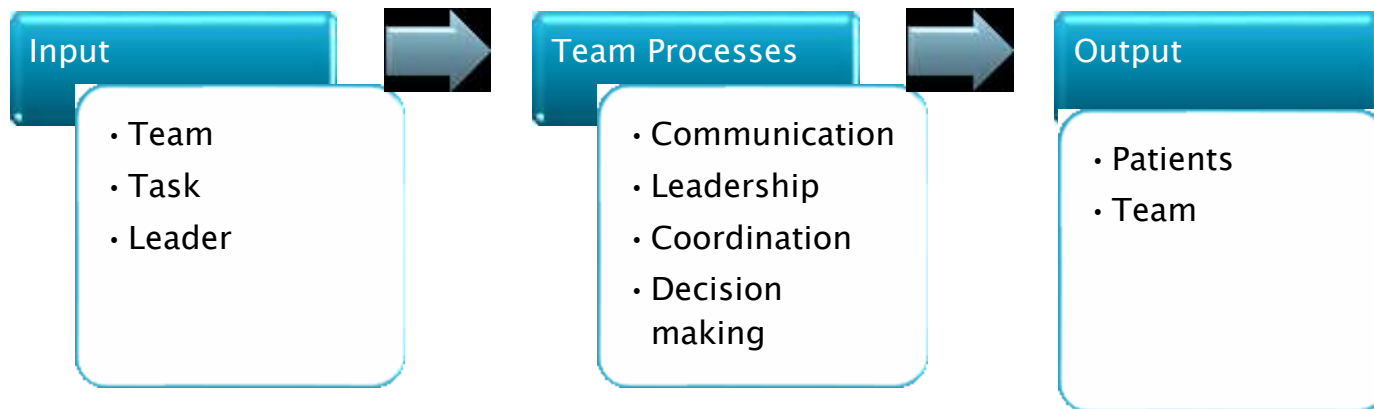
Barriers

- ▶ Team membership not constant ²⁶
- ▶ Poor communication ^{30, 31}
- ▶ Problematic power dynamics ^{32, 33}
- ▶ Hierarchical structures ³²
- ▶ High levels of autonomy ²⁶
- ▶ Poor understanding of roles ³⁶
- ▶ Conflict with different approaches to care ²⁶
- ▶ Staff attitudes ³⁵
- ▶ Organisational issues ³²
- ▶ Resource and time issues ³²


Strategies

▶ Team Performance Framework

(Reader et al, 2009)



Input – Team

- ▶ Culture – shared vision/values/perceptions ³⁵
 - ▶ Supportive environment ³⁶
 - ▶ Abolishing hierarchies ³⁷
 - ▶ Knowledge of team member roles and responsibilities ³⁶
 - ▶ Interdependence ³⁸
 - ▶ Team based training ³⁹
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Team Processes

- ▶ Communication Checklists 30, 35, 39
- ▶ Team leader behaviour 36
- ▶ Multi-disciplinary ward rounds 40
- ▶ Collective ownership and responsibility for goals (daily goal sheets) 41, 42

Outputs

▶ Patients

- ↓ mortality, ↓LOS, ↑quality of care & patient satisfaction ^{33, 34}

▶ Staff

- Job satisfaction, ↑ morale, ↓stress, ↓ staff turnover ³⁰

Thanks for listening

Any questions?

- ▶ How can collaboration be improved in your unit?

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