Quality improvement model to ensure effective communication during Head and Neck multidisciplinary meetings

Manuela Cresswell
ENT ST5 South West Peninsula
Student Healthcare Management, Leadership and Innovation MSc.

Background:
Multi-disciplinary Meetings (MDM) are instrumental in the management of Head and Neck (H&N) cancer and are considered best practice.¹⁻⁵
Communication failures account for up to 70% of adverse events in healthcare.⁶ Leadership and human factors are fundamental to ensure good communication in an environment of highly complex information where life-changing decisions are made.⁷

Objectives:
To propose a model for improving communication in H&N MDM based on current evidence to minimise human error.
Methods: Review of the literature and proposal of quality improvement model.

Results:
The review of the literature highlighted:

- The Calman-Hine report on the structure and organisation of cancer services in England and Wales introduced the necessity to adopt Multidisciplinary Team (MDT) working.⁸ This report was followed by similar reviews in the rest of UK⁹

Benefits of MDT practice ^{2,3,5,9-11}
Improved patient outcomes
Prolonged survival rates
Better staging accuracy
Increased adherence to clinical practice guidelines
Reduced time to treatment
Increased recruitment into clinical trials
Enhanced educational opportunities
Better job satisfaction and psychological wellbeing in health professionals

Communication standards of MDT practice set out in the literature
MDTs should ensure that accurate and complete data on cancer staging, management and outcomes are recorded. ^{3,11}
“Recording cancer site and accurate stage is a key medical responsibility, with best practice suggesting that this should be clearly documented and captured at the MDT” ¹²
Good communication between levels of care and data collection. ¹
Good leadership of MDT is crucial for effective teamwork and enables successful communication during MDM. ⁷

A 3-step model is proposed:

1. Designated leader for MDM.
 - The leader will be chosen by MDT members and can be any member if the team. A survey of MDT members in the UK showed that they believe the qualities of a good MDT leader are being calm, strong, firm, having good communication skills and ensuring enforcement of clinical decision making.¹³ These qualities would be desirable for the role.
 - The role of the MDT leader will encompass:
 - Chairing and timekeeping MDM on weekly basis.
 - Inspire and encourage mutual respect and participation of team members.
 - Coordinating and overseeing steps 2 and 3 of this model.

2. Key Patient Information (KPI) checklist to improve communication and reduce human error.

Patient information	Current pathology	Management strategy
<ul style="list-style-type: none">• Name ☐• Hospital number ☐• Date of birth ☐• Comorbidities ☐• Performance status ☐• Social support ☐	<ul style="list-style-type: none">• Clinical presentation ☐• Investigations ☐• Clinical ☐• Radiology ☐• Histology ☐• TNM classification ☐	<ul style="list-style-type: none">• Further investigations required? ☐• Curative/Palliative ☐• Treatment alternatives ☐• Recommended options ☐• Follow up ☐• Other considerations: nutritional/psychological ☐

- Adopting the KPI checklist should facilitate and signpost communication as well as easing documentation of outcomes by the MDT coordinator, as it ensures key points are covered (i.e nutritional status, DNAR status)
- The checklist should be considered a work in progress and modifications by MDT members will help tailor it to suit the local service. It could be electronic or in paper form.

3. Team development and human factors training. Effective interaction in H&N MDM between team members is required to agree recommendations about management of patients.^{12,13} Raising the team’s awareness of human factors should create a safer and more cohesive and rewarding work environment

Conclusions:
MDT working is standard in the management of H&N cancer. Leadership, team development and human factors should not be overlooked in the context of MDM. We suggest a model tailored to H&N MDM that incorporates a clear leadership role, a structured communication tool to signpost key information and reduce human error.

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