

# Team-Based Care

## The Changing Face of Cardiothoracic Surgery



Todd C. Crawford, MD, John V. Conte, MD, Juan A. Sanchez, MD\*

### KEYWORDS

- Teamwork • Collaborative care • Clinical microsystems • Team-based
- Patient care • Patient safety • Multidisciplinary approaches

### KEY POINTS

- Effective collaboration and teamwork are essential to providing high-quality care and critical to avoiding adverse events and errors.
- An interdisciplinary environment where every member of the team is valued and can significantly contribute toward common goals and objectives is essential to achieving superior results.
- Well-designed multidisciplinary teams, structured conferences and rounds, and strong nontechnical skills by team leaders significantly reduce the rate of adverse events, lower lengths of stay, and reduce costs.

### INTRODUCTION

An increasing awareness is emerging of the beneficial impact of a multidisciplinary, team-based approach to the management of several high-risk, complex clinical conditions as demonstrated by improved outcomes and greater patient, family, and staff satisfaction.<sup>1–5</sup> As patient acuity and complexity increase, health care providers will frequently need to draw on the expertise of various types of health care professionals to optimize patient care. This disposition is especially relevant in cardiothoracic surgery, whereby older and sicker patients are increasingly being referred for surgery. Here, the multidisciplinary team must function cohesively, aligning provider initiatives with patient goals in order to achieve the best outcomes. By drawing on a variety of methods and perspectives from different disciplines, these multidisciplinary teams create a synergized environment that improves outcomes by creating something greater than the sum of its parts.

---

Division of Cardiac Surgery, Johns Hopkins University School of Medicine, 1800 Orleans Street, Zayed 7107, Baltimore, MD 21287, USA

\* Corresponding author.

E-mail address: [jsanch25@jhmi.edu](mailto:jsanch25@jhmi.edu)

Surg Clin N Am 97 (2017) 801–810

<http://dx.doi.org/10.1016/j.suc.2017.03.003>

0039-6109/17/© 2017 Elsevier Inc. All rights reserved.

[surgical.theclinics.com](http://surgical.theclinics.com)

## TEAM-BASED SURGICAL CARE

Given the technical complexity and high-risk nature of cardiothoracic surgical care, hospital-based teams can demonstrate their value on several dimensions. Such an approach facilitates better decision making, improved diagnostic accuracy, and adherence to clinical practice guidelines, thereby reducing variation in clinical practice and avoiding errors. Well-structured clinical teams ensure the appropriateness and timeliness of treatment plans and the open discussion of risks in a patient-centered environment, where each member, including the patient, is able to contribute independently to the diagnostic and treatment decisions about the patient.<sup>6</sup>

Multidisciplinary care has been part of established clinical practice in many specialties such as transplantation and oncology. An early example of interdisciplinary collaboration in medicine was the institution of the “tumor board,” where, based on the final pathologic diagnosis, medical and surgical specialists were able to develop a comprehensive treatment plan. Today, more than 80% of all patients with cancer are managed in the context of organ-specific multidisciplinary cancer conferences, ensuring an evidence-based approach.<sup>7</sup> Modern multidisciplinary teams are able to evaluate and discuss all available treatment strategies and the associated risks of each throughout the entire course of care.

The degree of integration and coordination of clinical teams has been highly variable and highly dependent on the individuals involved and the organizations in which they function. With the evolution of hybrid therapies for cardiovascular diseases and the emphasis on quality improvement, patient safety, and shared governance models, the practice of cardiothoracic surgery has evolved quite dramatically to a paragon of interprofessional and multidisciplinary collaboration and coordination. This shift has been enhanced by emerging evidence supporting improved outcomes, reduced costs, and a positive impact on the health care workforce. Health systems with a strong teamwork orientation, for example, simply exhibit better surgical outcomes following coronary artery bypass grafting (CABG).<sup>8</sup>

Like an orchestra, the coordination, communication, and teamwork performance of such teams can enhance the effectiveness and efficiency of care while protecting patients from harm and ensuring continuity across the entire spectrum of care. Leadership is crucial, and full commitment to placing the patient at the center is essential in their success. Teams are the antidote to the “silos” created by specialization and compartmentalization, which impair the ability to share philosophic approaches to treatment plans and are rife with communication failures and breakdowns. The shared accountability provided by these teams result in a cohesive service delivery model with high levels of clinical effectiveness, workforce satisfaction, and an enhanced patient experience. Hospital-based teams can be configured in a variety of ways but, at their core, consist of individuals across a variety of disciplines, professions, and functions committed to achieving the best possible outcome for the patient.

Cardiothoracic surgery lends itself to following a team-based approach. Preoperatively, cardiothoracic surgeons rely on physiologic and imaging data, such as pulmonary function tests and echocardiography, which are provided by subspecialists and other health professionals to guide treatment strategies. Primary care providers are instrumental in risk stratification and management of comorbidities before surgery. In all, a set of carefully coordinated steps requiring specific expertise and skill is required to restore the patient to health. During the perioperative phase, multidisciplinary approaches to extubation, blood management, and acute rehabilitation have been shown to be superior to the traditional fragmented and isolated process of patient care.<sup>9–11</sup>

Download English Version:

<https://daneshyari.com/en/article/5734975>

Download Persian Version:

<https://daneshyari.com/article/5734975>

[Daneshyari.com](https://daneshyari.com)