Multidisciplinary team meetings; significance and requirements

Mohammed Al-Musawi

MBChB, MSc, FIBMS, FRCS. Consultant Cardiac surgeon, Research Faculty, Department of Surgery /School of Medicine/University of Colorado, USA. Email address: mohammed.al-musawi@ucdenver.edu

Holding an event with a defined agenda can help producing better communication and agreement on actions to improve outcomes.[1] Multidisciplinary team meetings (MDTMs) aim at uniting care professionals from different disciplines to decide upon the best possible treatment plan for the patients based on the available scientific evidence.[2] Clinical decisions are made based on reviews of clinical documentation such as case notes, test results, diagnostic imaging etc. The patient may or may not be present.[3] Although many medical centres have implemented MDTMs, and several previous studies have shown that they generally improve patient satisfaction and physician adherence to treatment guidelines, their use is not universally supported.[4] The MDTMs has been implemented by many cancer centres because of the multidisplinary nature of cancer pathology, yet other specialities still need different specialities to care for single patient. Using MDTMs can help on providing the opportunity of face to face meeting between the different care providers to discuss the problem together rather than on consultation papers or on phones. And despite that there is a consensus that multidisciplinary teams are a good thing, yet this has been disputed by some.[5] So in order to make MDTMs a useful and efficient and high-quality, effective MDTMs should have characteristics. Certain characteristics make the framework needed to implement high-quality MDTMs.[6] Many guidelines are published from different institutes showing how to implement high quality MDM and what we learn from reviewing those different guidelines is that there is no 'one size fits all' approach to MDTMs. Instead, it each specialty needs its own structure of MDTMs which would serve its purpose. More than just having objectives and structure for the meeting, many institutes produced toolkits directed at establishing and improving the quality of MDTMs.[7]

So to summarize what is required to have effective MDTMs we refer ourselves to this structure which includes most of the important components of effective and high quality MDTMs:[8]

I. The Team

- Level of expertise and specialization
- Attendance of MDTMs
- Leadership (e.g., chair or leader of the MDTMs)
- eam working and culture (e.g., mutual respect and trust, equality, resolution of conflict, constructive discussion, absence of personal agendas, ability to request, and provide clarification)
- Personal development and training

II. Infrastructure for MDTMs

- Appropriate meeting room
- Availability of technology and equipment

III. MDTMs organization

- Regular meetings

IV. Logistics

- Preparation for meetings
- Organization during meetings
- Post-meeting coordination of services for the patient

V. Patient-centered clinical decision-making

- Who to discuss, i.e., having local mechanisms in place to identify all patients where discussion at MDTMs is needed
- Patient-centered care (e.g., patient's views and preferences are presented by someone who has met the patient, and the patient is given sufficient information to make a well-informed decision on their treatment and care)
- Clinical decision-making process

- The information the team needs to make informed decisions/recommendations at team meetings are as follows: pathological, radiological, comorbidities, psychosocial, palliative care needs, patient history, and patient views
- The decisions/recommendations at team meetings need to be evidence-based (in line with guidelines), patient-centered, and in line with standard treatment protocols (unless there is a good reason against this)

VI. Team governance

- Organizational support (e.g., funding and resources)
- Data collection during team meetings, analysis, and audit of outcomes (e.g., patient experience surveys); the results of these investigations are fed back to MDTMs to support learning and development
- Clinical governance (e.g., there are agreed policies, guidelines, and protocols for MDTMs; performance assessment and peer review against similar MDTMs using cancer peer review processes and other tools)

We believe in the significance of mutiteam approach in managing certain pathologies and clinical scenarios. And we reemphasize the fact that what we showed here is framework which worked for some people in certain institute yet we can modify it and tailor it to our own goals and available resources.

References:

1. MacCallam J, Higgins L. Multidisciplinary meetings as an effective clinical intervention. ***Nurs Child Young People***. 2014 Jun;26(5):16-20. doi: 10.7748/ncyp.26.5.16.e312.
2. Horlait M, Baes S, Dhaene S, Van Belle S, Leys M. How multidisciplinary are multidisciplinary team meetings in cancer care? An observational study in oncology departments in Flanders, Belgium. ***J Multidiscip Healthc***. 2019;12:159–167. Published 2019 Feb 21. doi:10.2147/JMDH.S196660.
3. NHS. Multidisciplinary meeting. Available at: ***https://www.datadictionary.nhs.uk/data_dictionary/nhs_business_definitions/m/multidisciplinary_team_meeting_de.asp?shownav=1***. Accessed on 23 December 2019.
4. Pullen LC. Evidence supports the use of multidisciplinary team meetings. CA: a cancer journal for clinicians 2017;67(5):351-2.
5. Franz E. Multidisciplinary team meetings encourage overtreatment. ***BMJ*** 2015;351:h4630 doi: https://doi.org/10.1136/bmj.h4630.
6. Ministry of Health. 2012. Guidance for Implementing High-Quality Multidisciplinary Meetings: Achieving best practice cancer care. Wellington: Ministry of Health. ISBN 978-0-478-39375-0 (online) HP 5535. ***www.health.govt.nz.***
7. Ministry of Health New Zealanders. Lung Cancer Multidisciplinary Meeting Toolki. ***https://www.health.govt.nz/system/files/documents/publications/lung-cancer-multidisciplinary-meeting-toolkit-may15.pdf*** (accessed 23/12/2019).
8. Soukup T, Lamb BW, Arora S, Darzi A, Sevdalis N, Green JS. Successful strategies in implementing a multidisciplinary team working in the care of patients with cancer: an overview and synthesis of the available literature. ***J Multidiscip Healthc***. 2018;11:49–61. doi:10.2147/JMDH.S117945.

Abbreviation: Multidisciplinary team meetings (**MDTMs**)

Conflict of interest: Nothing to declare.

Funding: The authors report no external funding source for this paper.