BACKGROUND:

• The Neurumotor Clinic (NMC) is comprised of a multi-disciplinary team (MDT) that provides tertiary rehabilitation services to children and youth with cerebral palsy (CP) and their families.

• Role clarity and professional boundaries are an essential element of efficient and effective team functioning.

• The International Classification of Function, Disability and Health for Children and Youth (ICF-CY) framework has been demonstrated to be useful in clarifying team roles in adult inpatient rehabilitation settings.¹,²

• No evidence exists in the literature as to the use of the ICF-CY to achieve role clarity.

METHODOLOGY:

• Using Delphi survey guidelines³, MDT members were individually emailed questions to assist them to identify the domains with which their daily work was associated.

• Each member met in a focus group format with the colleagues from their discipline to achieve consensus on these domain and elements.

• Using Nominal Group Technique⁴, the MDT met on two occasions for 1 hour to achieve consensus on priority domains for each discipline.

• Results were used to streamline documentation.

• Forty-five service charts were audited 16 months post-implementation to verify discipline and role compliance with ICF-CY agreed upon domains.

OBJECTIVE:

To facilitate role delineation, reduce duplication between providers and identify gaps in the tertiary rehabilitation services for children & youth with CP and their families.

RESULTS

The ICF-CY framework helped to minimize team emotion associated with protection of roles.

The ICF-CY framework guided team members to identify the domains that each discipline would lead.

By using the ICF-CY structure, gaps in the services were identified and acknowledged.

Using this framework, team members were able to differentiate between inter-agency and cross-ministerial provider roles.

CONCLUSION:

• The ICF-CY framework is a useful tool in achieving consensus on role delineation amongst the allied health and nursing members of a diverse MDT.

• Delphi survey technique was helpful in providing initial preparation and structure to explore underlying members assumptions in a non-adversarial way and highlighting information which lead to discipline specific consensus.³

• Nominal Group technique provided the means to discuss the responses and identify lead professions in each domain in an open manner engaging MDT members in a time efficient democratic decision making process.

• Using the ICF-CY to delineate roles also raised awareness amongst the MDT team of the multiple domains of the framework and focused their work.

• Compliance amongst MDT members 16 months post-implementation was very high in the Body Function, Body Structure and Environmental Factors domain, moderate in the Activity and Participation domain, and poor in the Participation domain.

REFERENCES:


