

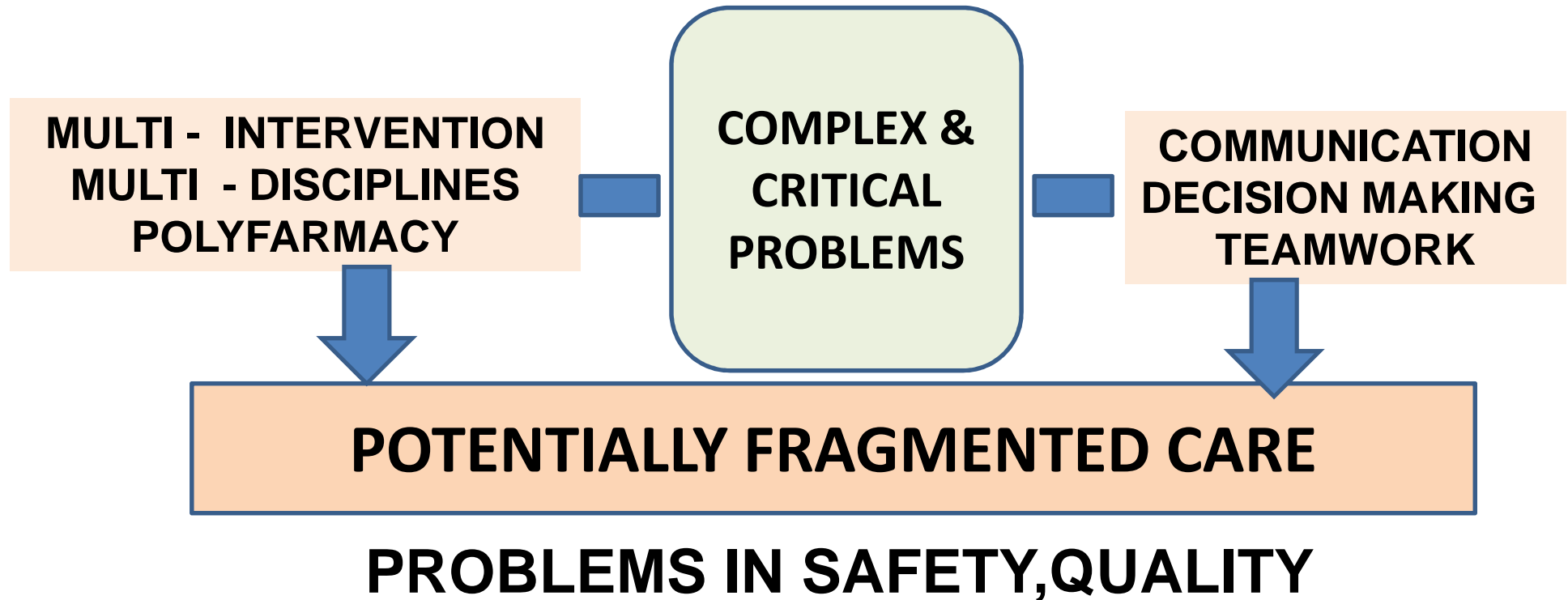
INTERDISCIPLINARY APPROACH IN CRITICAL CARE NURSING

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CRITICAL CARE SETTING

**People with life-threatening injuries
and illnesses**



CRITICAL CARE SETTING

Adverse events and serious errors are common in critical care (Manojlovich, 2007)

communication between nurses and physicians may be the most significant factor associated with excess hospital mortality in critical care settings.

Errors occur frequently in intensive care units, with error rates as high as 1.7 per patient per day (Thomas,2003).

CLINICAL CARE GOVERNANCE



**INTEGRATED AND COMPREHENSIVE
PATIENT CARE**

Holism, humanism and care



**INTERDISCIPLINARY APPROACH
IN PATIENT CARE**

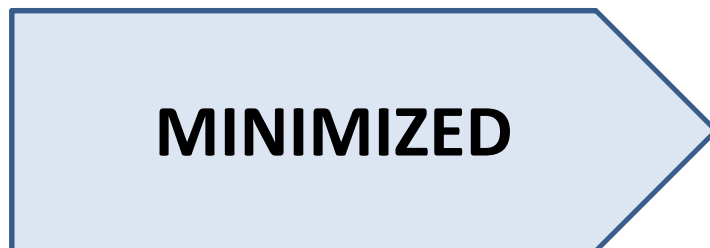
INTERDISCIPLINARY MODEL of PATIENT CARE



SYNCHRONIZED HEALTHCARE PROFESSIONALS in a PARTICIPATORY, COLLABORATIVE and COORDINATED APPROACH TO SHARE DECISION MAKING in delivering PROCESS OF CARE



CREATE A NEW CULTURE
To support integration and collaboration of care practices



MINIMIZED

**lack of coordination
role overlap
Fragmented care**

INTERDISCIPLINARY APPROACH



Health care professionals **GROW UP & LEARN** in a situation, that

- **SUPPORT MUTUAL TRUST**
- **WILLINGNESS TO SHARE DECISION MAKING**



COHESSIVENESS



SHARE EXPERTISE

>

PERSONAL AUTONOMY

Collective Culture

Expert Culture

WHY COHESSIVENESS IS NEEDED ?



HISTORICALLY, IN MULTIDISCIPLINES :

The problem do exist in:



- **ORGANIZATIONAL STRUCTURALISM**
- **POWER IMBALANCES**
- **ROLE SOCIALIZATION**

ORGANIZATIONAL STRUCTURALISM



Need to shift from RIGID BUREAUCRATIC STRUCTURED



FASILITATE Health Professionals providing Patient Centered Care



D-M to the level of practice where patients come to seek resolution

**UNSTRUCTURED, SHARED, INFORMAL, FUNCTIONAL, EMPOWERING,
PARTICIPATIVE, CONSULTATIVE**



POWER EQUALIZATION

POWER IMBALANCES

ROLE CONFLICT

Overlapping competencies & responsibilities

GOAL CONFLICT

Value differences, dissimilar philosophies

Identify Their Own Professional Group And Block Their Ability To Consider The Opinions And Perspective Of Others

ROLE SOCIALIZATION



The development of identity and pattern of practice in health profession is based on a process of socialization in which knowledge, skills, values, roles and attitudes associated with particular professional practice are aquired



UNIQUE WAY OF THINKING AND ACTING



ITS OWN CULTURE

COLLABORATIVE PRACTICE



**Must learn to accept a blurring of practice boundaries
Trust other disciplin members in sharing patient care
process**

**Role Socialization Must Be Expanded To Include
Collaboration With Other Health Care Colleagues**

**ESTABLISH AN UNDERSTANDING THAT
RESPECT DIFFERENCES VALUES & BELIEFS**

INTERDISCIPLINARY MODEL OF PATIENT CARE



KEY INGREDIENTS:

Sense Of Control, information Sharing, attention To Overlap & Responsibility, structuring Intervention

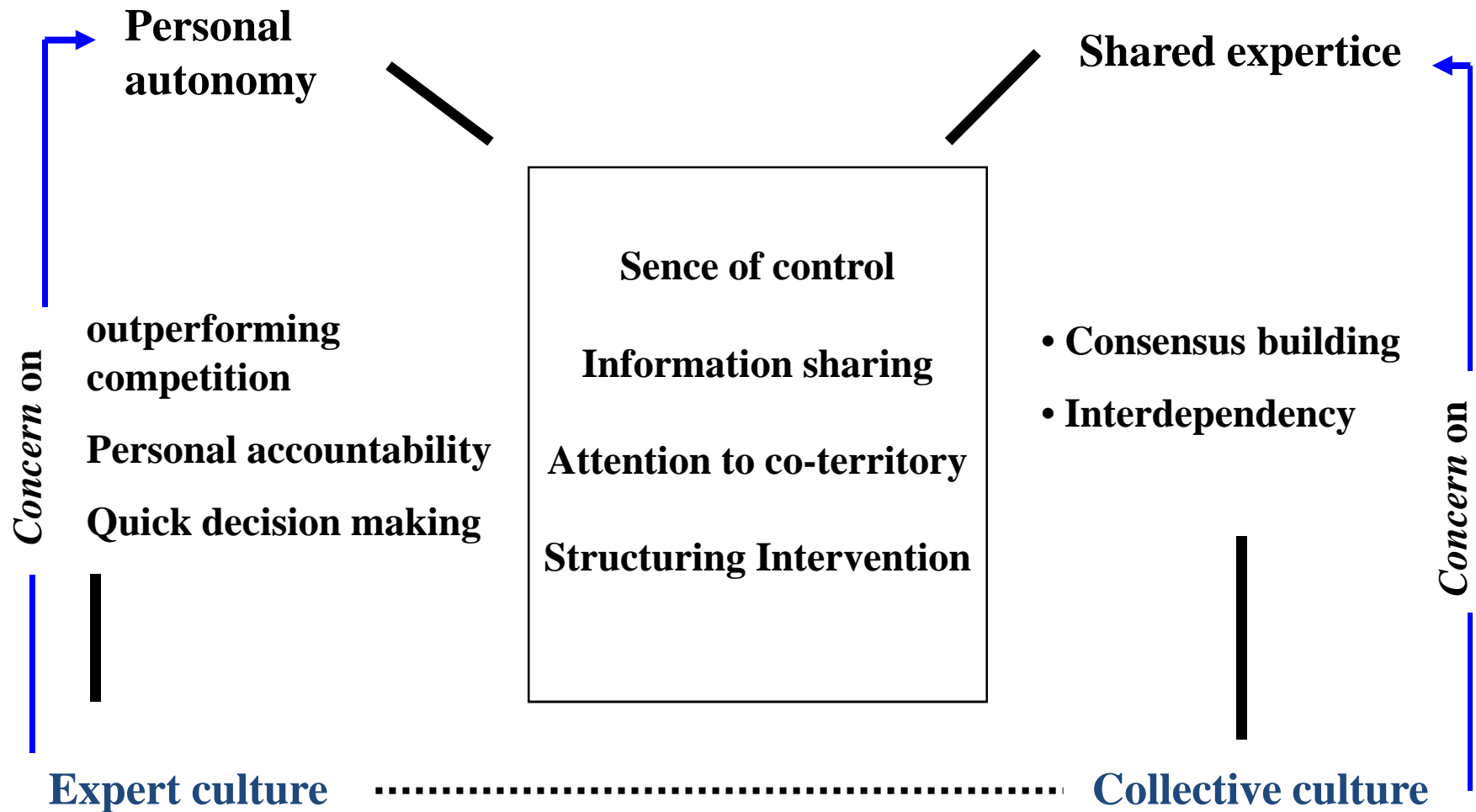


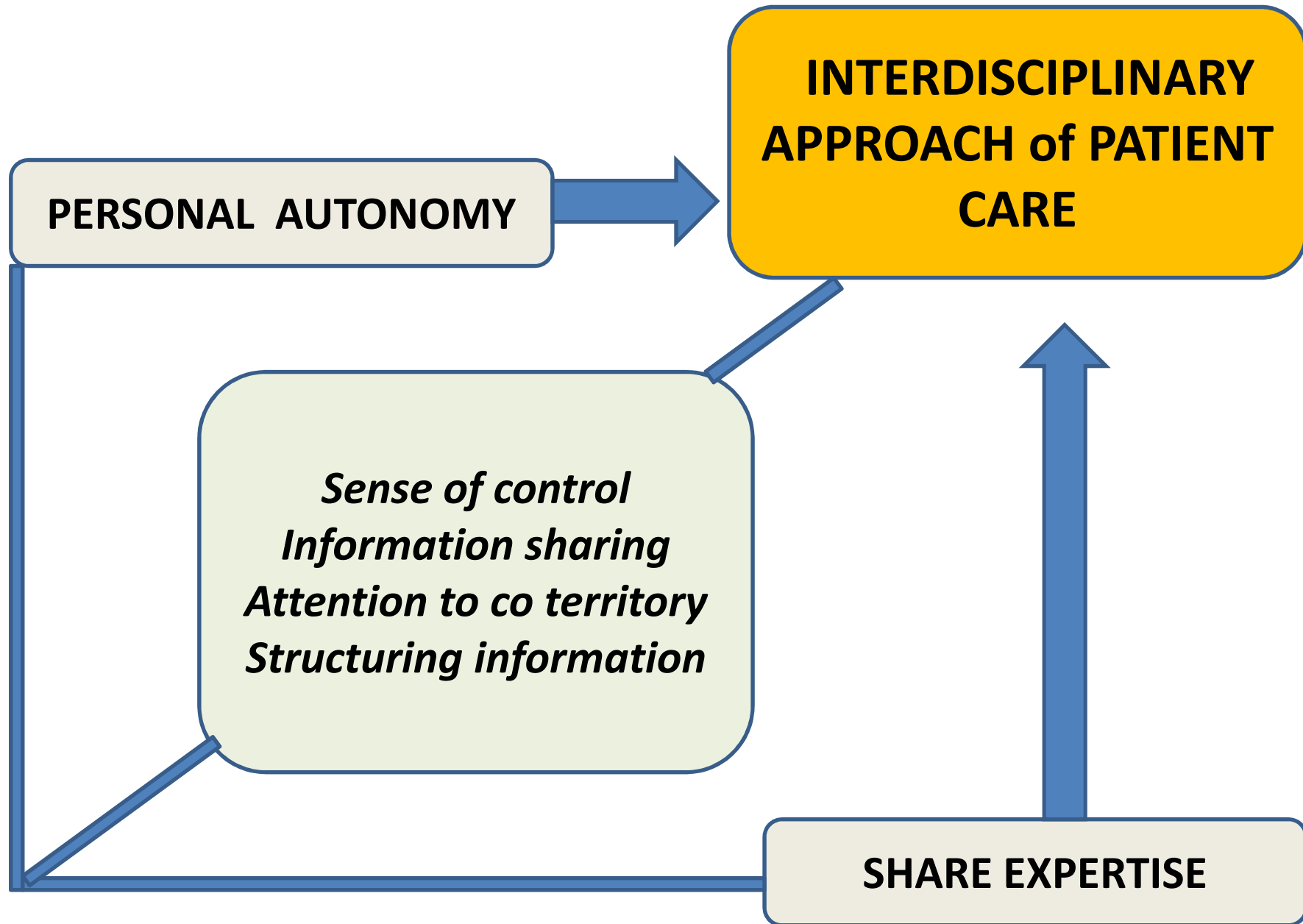
Components of Model



- INTEGRATED CARE PATH
- TEAMWORK
- INTEGRATED DOCUMENTATION
- Interdisciplinary ROUNDS or case conference

CONCEPTUAL FRAMEWORK: The essence of collaborative practice on interdisciplinary Model of Patient Care





INTERDISCIPLINARY MODEL OF PATIENT CARE

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**CASE
MANAGEMENT**

CASE MANAGEMENT

A delivery – of – care approach

**COORDINATES AND LINKS HEALTH CARE SERVICES
TO CLIENTS**

... A COLLABORATIVE PROCESS

Health care professional work together as an
INTERDISCIPLINARY TEAM

.....From admission to discharge

**CASE
MANAGEMENT**

..Integrated care path as clinical guidelines ...



**CASE MANAGER
Clinical Nurse Specialist**

ROLE DIMENSIONS

**CLINICAL/PATIENT CARE
MANAGERIAL/ LEADERSHIP
INFORMATION MANAGEMENT
FINANCIAL
PROFESSIONAL DEVELOPMENT**

CASE MANAGEMENT

A delivery – of – care approach

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.....From admission to discharge

focusing on **daily evaluation** of client progress towards specific outcomes, **modifying care** based on their evaluation and **preparing** clients for timely **discharge** or transition to other areas

CONCLUSION

In Interdisciplinary model of patient care,
physicians and nurses work cohesively
in a partnership collaboration



COHESIVE PROFESSIONAL PRACTICE CLIMATE



LEARNING CLIMATE
toward collaborative professional partnership.

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