# Interdisciplinary Teamwork in Nursing Homes

**Nursing Home Social Work Network**
Webinar Series

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This webinar series is made possible through the generous support of the
*Retirement Research Foundation*

*Thank You!*

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# Nancy  Wilson,  LMSW

* Nancy L. Wilson , LMSW  has  worked as a gerontological social worker for almost 4 decades  and  is currently an Associate Professor in the Department of Medicine- Section of Geriatrics,  Assistant Director of the Huffington Center on Aging at Baylor College of Medicine , and  affiliated with the Baylor- Veterans Affairs Center of Excellence in Health Services and the University of Houston Graduate College of Social Worker.  Her practice, research, and education interests focus on advancing interdisciplinary models of mental health and long-term care service delivery to elders and families coping with chronic illness including depression, dementia and anxiety.  She  previously directed the Houston GITT which developed team training curriculum for 7 disciplines.

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# Gabrielle Langley, LCSW

* Gabrielle Langley is a clinical social worker and psychotherapist with over 15 years specializing in mental health issues affecting older adults and their loved ones. With a research and practice specialty in neurocognitive impairments, Ms. Langley is a sought after public speaker who has been invited to lecture by universities, hospitals, corporations, churches/synagogues, and the Alzheimer's Association.  She has worked for one of the largest long-term care facility in the Gulf-Coast area since 1997 and has been instrumental in designing and expanding specialized programs to help people affected by memory disorders.  In addition to her work in mental health, Ms. Langley is also an award winning poet.
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# Objectives

1. Identify key teams within nursing homes

2. Review the "why" and "how" of effective teamwork

3. Highlight some key roles for social workers in nursing home team care

4. Recognize some effective communication tools, principles  and strategies that will  be inclusive of resident/family and contribute to effective teamwork

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# Teamwork Is All Around Us

## What is teamwork for today's discussion ?

*Team-based care is the provision of services to individuals, families, and the nh community by at least two providers who work collaboratively with residents and their caregivers—to the extent preferred by each resident —to accomplish shared goals within and across settings to achieve coordinated, high-quality care.*

Modified from: Naylor MD, Coburn KD, Kurtzman ET, et al. *Inter-professional team-based primary care for chronically ill adults: State of the science.* Unpublished white paper presented at the ABIM Foundation meeting to Advance Team-Based Care for the Chronically Ill in Ambulatory Settings. Philadelphia, PA; March 24-25, 2010.

## Why Teams and Teamwork?

∗ Complex and Interrelated bio-psycho-social problems of older adults/nursing home residents

∗ Chronic Health Problems

∗ Multiple settings of care

## Multi-Team System (MTS) for Resident Care



http://teamstepps.ahrq.gov/
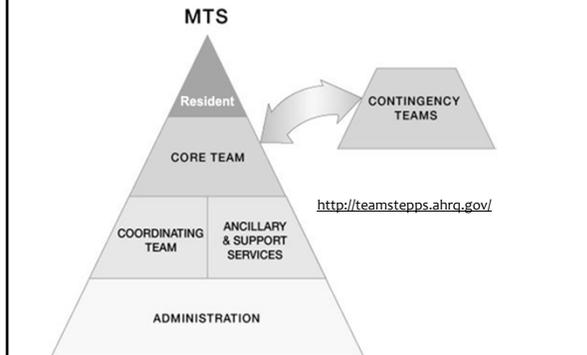
## A Core Team is…



**A group of care providers** who work interdependently to manage care for a set of assigned residents from point of assessment to discharge or death

*Core Team members have the closest contact with the resident!*
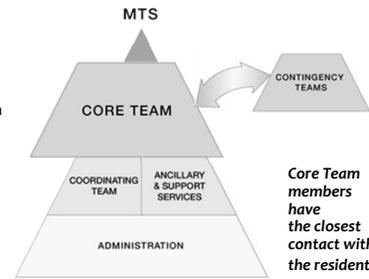
## Stop and Reflect…

∗ Who are the members of your core team ?

∗ What different disciplines/roles are represented?

∗ How well do I understand the roles, competencies and training of each of these individuals?

∗ How well do they understand my roles and skills?

## Essential Components of Effective Team Functioning

Guide to Interdisciplinary Practice in Rehabilitation Settings, 199
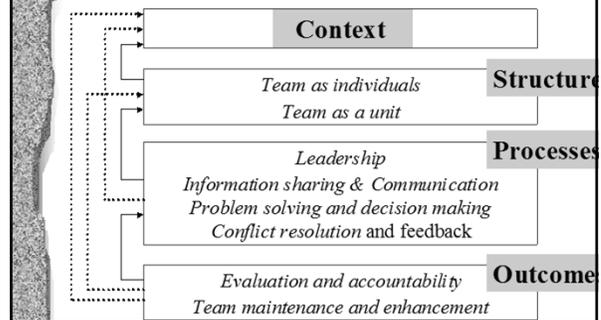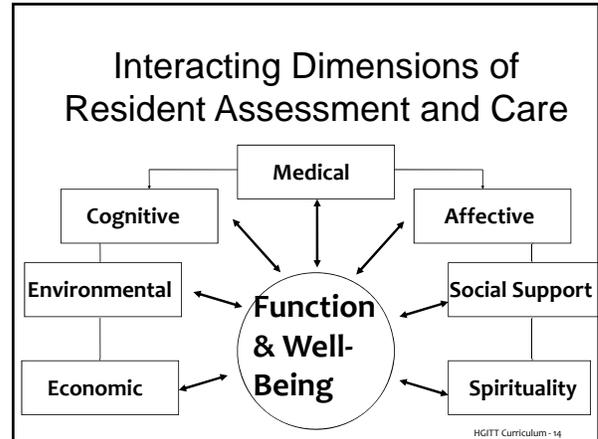
### Some Unique dimensions of teamwork in long-term care

We are always working in the homes of our clients…and their homes are "regulated"

Relationship quality may "trump" other measures of quality used in traditional health care

Regulatory environment with required use of MDS and other defined practices

Vital roles of wide range of direct care staff and both licensed and unlicensed staff

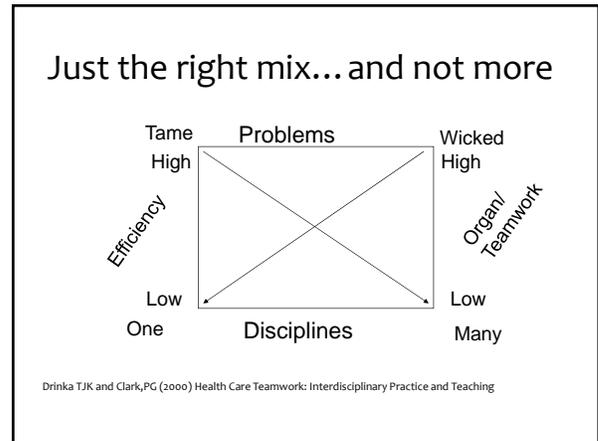Family involvement within fabric of daily care

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## Interacting Dimensions of Resident Assessment and Care

**Medical**

**Cognitive**  **Affective**

**Environmental**  **Social Support**

**Function & Well-Being**

**Economic**  **Spirituality**

HGITT Curriculum - 14

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## Exploring Personal and Professional Values: Key to Trust and Collaboration

*Decision making is influenced by both personal and professional culture*

* Age
* Gender
* Religion
* Personal cultural identity and beliefs
* Professional values
* Personal and professional life experiences

HGITT curriculum, 200

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## Just the right mix…and not more

Tame    Problems    Wicked
High                High

Efficiency          Organl/Teamwork

Low                 Low
One    Disciplines    Many

Drinka TJK and Clark,PG (2000) Health Care Teamwork: Interdisciplinary Practice and Teaching

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## Teamwork Outcomes in Long-Term Care

* Improve resident outcomes: Evidence for this
* Reduce clinical errors: evidence for this
* Improve process outcomes: deficiencies?
• Increase resident satisfaction
* Increase family satisfaction
* Increase staff satisfaction
* Reduce staff turnover
* Reduce resident and family grievances and complaints

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## Social Work in LTC Teams: Structure

* Have we clearly defined-and demonstrated-our role in delivering comprehensive care? ( see Downes and Hector Role)
  * Pre-admissions
  * Care Plan Meetings: Goals of Care, mood and behavior, pain etc.
  * Restraints, Resident or Family Distress, Condition Change
* Have we helped others understand what is NOT our role and involved other appropriate team members as relevant?
  * LONE RANGERS have added challenge-not everything to everybody
* Do we involve and engage our core team colleagues and ancillary colleagues as appropriate?
* How do we handle turnover and " role orientation" of new members including new residents/families?

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## Gabrielle shares practical experience

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## Social Work in LTC Teams: Processes

* Support consideration of the resident/family needs, strengths--
  * Ways to insure they are invited, involved as interested—
* Input from others: CNAs, non-clinical staff
* Influence care through our timely, efficient communication : written and verbal
  * Verify and share information at key points: Admission, transition, point of distress/concern

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## Advancing Teamwork: "Interfacing" not Interfering



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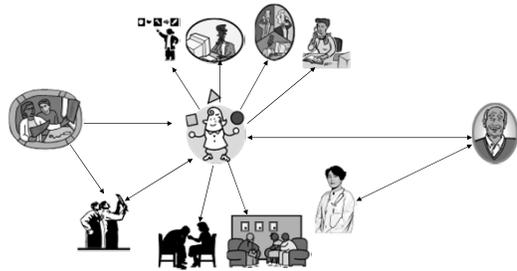
# Gabrielle shares example(s) of her communication with nh colleagues

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## Consider these principles and skills to influence team outcomes

* **Control Yourself:** You Can't control others
* **Remember to QTIP:** Don't take things personally
* **Listen First:** Only then will you be heard
* **Don't preach about what is wrong:** Explore what is going on
* **Don't whisper behind doors:** Voice issues directly

* **Redirecting** changes the teams focus
* **Conceptualization** of issue in new way
* **Listening and finding** agreement-repeat and paraphrase
* **Exploring** allows solutions to evolve
* **Feedback** insures issues are discussed at point of origin

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## Gabrielle applies principles in example(s)

## Action Planning

*"To improve teamwork in your setting, what can you <u>commit</u> to focusing on?"*

**"The achievements of an organization are the results of the combined effort of each individual."**

**–Vince Lombardi**

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## Resources Available

TeamSTEPPS resources include:

* Three teamwork training curricula
* Course Management Guide
* Multimedia course materials
* TeamSTEPPS Implementation Guide
* Measurement tools
* Web site for updated resources and information: http://teamstepps.ahrq.gov/

## Speaker Contact Information

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*Thank you.*

A recording of this webinar is available through the *National Nursing Home Social Work Network* website:
http://clas.uiowa.edu/socialwork/nursing-home/webinars