Purpose
To measure patient perceptions of collaborative practice in an interprofessional team providing geriatric oncology assessments to older patients with cancer.

Background
The Senior Adult Oncology Clinic (SAOC) at Thomas Jefferson University’s Kimmel Cancer Center utilizes an interprofessional team approach to provide comprehensive geriatric oncology assessments and treatment plans for older patients with cancer. Our team consists of a medical oncologist, geriatrician, pharmacist, dietitian, social worker and nurse navigator. The importance of team-based healthcare delivery is well documented, however, experts agree that there is a need for more tools to assess the skills required to become a high-functioning team and a need to study the impact of collaborative practice on patient reported outcomes and satisfaction. For this study, we sought to evaluate patients’ experience and perception of our SAOC team function.

Intervention
Upon completion of a SAOC visit, patients were asked to participate in a short voluntary survey to assess team performance. The Jefferson Teamwork Observation Guide (JTOG) is a validated survey used with learners, that has been adapted to elicit patient perspectives of five domains of interprofessional collaborative practice, including communication (C), values/ethics (V/E), teamwork (T), roles/responsibilities (R) and patient-centeredness (PC). The Patient JTOG includes eight competency-based Likert Scale questions as well as one open-ended question. The survey was administered on secure mobile tablets by trained research assistants (RAs) who were not part of the healthcare team. The study received exempt approval by our Institutional Review Board and was conducted from October 2015 to March 2016.

Results
A total of 15 patients completed the survey. Eight respondents were male, and seven were female. Nine identified as Caucasian, four as African American and two as other. One hundred percent responded “Strongly Agree” to a global question about the importance of teamwork in patient care (mean 4.0). Overall satisfaction with the SAOC team was 3.93 out of 4.0. For the eight questions relating to each of the five collaborative practice competencies noted above, the team received an average score ranging from 3.64 to 3.80 out of 4.0, for a universal score of 29.66 (out of 32 possible), placing this team in the highest quartile of teams surveyed at our institution to date (n=407). In addition, all 15 respondents completed the open-ended qualitative comments with 14 out of the 15 being positive with multiple references to effective listening and communication, team coordination, and patient-centered care.

Conclusions
The SAOC has a relatively unique model of providing interprofessional geriatric oncology assessments. The Patient JTOG tool was easy to incorporate into a busy clinic and provided valuable feedback to our providers, demonstrating that our patient’s perceive the team as high functioning, patient-centered and collaborative. Based on these early results, our interprofessional consultative team design may serve as a model for replication for team based care delivery at other institutions.