

Caregiver Evaluation of a Palliative Care Consultation Team Using the Jefferson Teamwork Observation Guide (JTOG) by Caregivers of Severely Ill Patients

The goals of this project were to assess overall satisfaction with the palliative care team and to use the JTOG tool to analyze family perception of the interprofessional nature of palliative care and the effect it has on the delivery of care.

Background

Palliative care teams strive to improve the quality of life of patients and their families who are faced with life threatening illnesses by addressing the physical, psychosocial and spiritual aspects of their care (World Health Organization, 2017). The palliative care team is an interprofessional team made up of physicians, nurses, social workers and chaplains and often partners with many other disciplines. Palliative care has been shown to increase quality of life in patients with cancer and help improve communication amongst patients, their families and their care teams (Temel, 2010; Seow, 2008). Additionally, many studies have sought to prove the effectiveness of palliative care using validated tools such as the FAMCARE survey with mixed results (Parker, 2013).

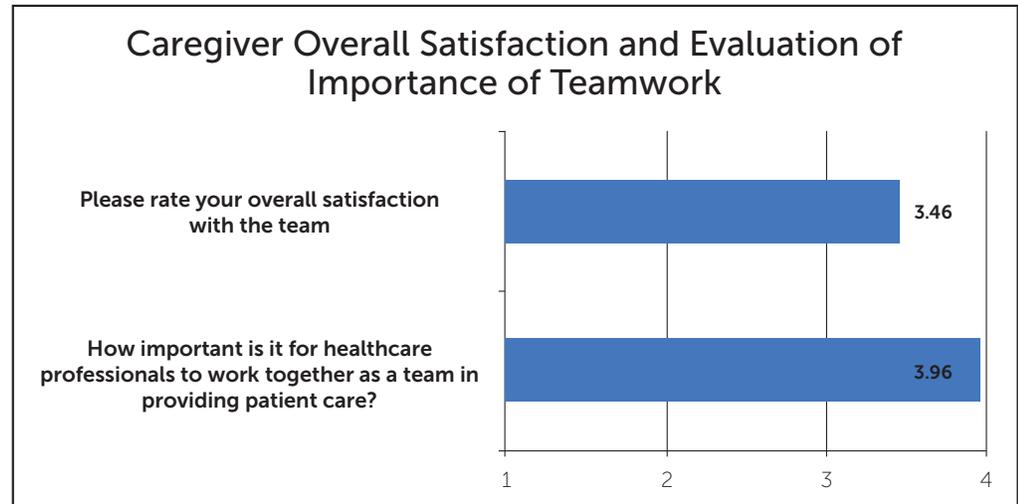
The goal of this project was to use a different validated tool, the JTOG, to analyze the effectiveness of our interprofessional team. Because palliative care is not a medical specialty whose effectiveness can be measured by procedural outcomes, teams often seek using satisfaction scores as a means of measuring how well they are doing. The JTOG replaced our prior patient satisfaction survey. The results are described below.

Methodology

The JTOG is a validated survey (Lyons, 2016) used with learners, that has been adapted to elicit patient perspectives of five domains of interprofessional collaborative practice: communication, values/ethics, teamwork, roles/responsibilities and patient-centeredness. Upon completion of an interprofessional family meeting discussing the patient's clinical status, a

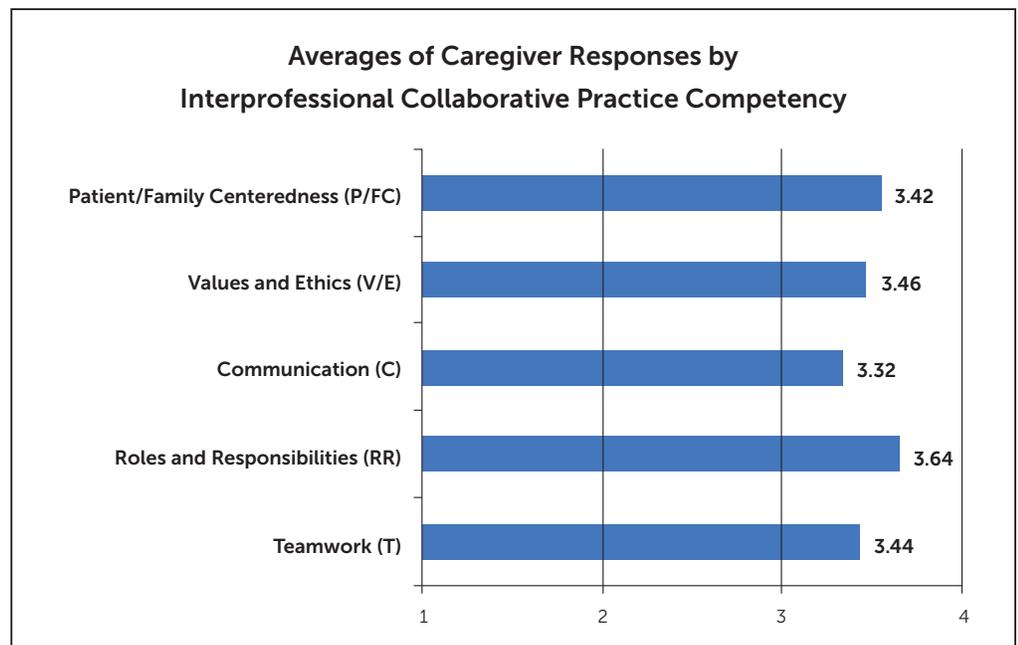
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Figure 1



Scale: 1=Least Satisfied/Important, 4=Most Satisfied/Important
n = 35

Figure 2



Scale: 1=Strongly Disagree 2=Disagree 3=Agree 4=Strongly Agree
n = 35

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trained research assistant, who was not part of the healthcare team, administered the survey via secure mobile tablets.

Results

During the period of March 12, 2016 through December 2, 2016, 35 surveys were completed by caregivers. Twenty-seven respondents were female and eight were male. Sixteen respondents identified as Caucasian, 10 African American, 14 Asian American and three as Hispanic. Eighty percent of respondents were 40 or older (27/35) and 20% of them were younger than 40 (8/35). One hundred percent of respondents agreed to the importance of healthcare professionals working together (mean 3.96). Overall satisfaction with the palliative care team was 3.46 out of 4.0. Of the other eight questions relating to the five collaborative practice competencies, the team received an average score of 3.46. Of note, respondents were able to identify multiple members specific to the palliative care team as being involved in the overall care team: doctors (92%), nurse practitioner (58%), care manager (33%) and social worker (28%). The families were also given the opportunity to give qualitative feedback by answering an open-ended question. Representative comments are in Figure 3.

Conclusions

The use of the JTOG, administered by trained research assistants using secure mobile tablets, helped dramatically increase our response rate to patient satisfaction surveys. The surveys were completed after an interprofessional team family meeting. Previously, the surveys were completed post discharge by our team's administrator. The JTOG helped to identify areas where the team could improve, including listening to one another and engaging with one another in friendly interactions. At the same time, the tool helped provide us with feedback that families were overall satisfied with our

Figure 3

Please list anything the care team did that positively affected your experience as a caregiver.
They were very compassionate.
Very friendly and made me feel part of the team.
They tried their best. They exhaust all options and do not give up on patient care. They have not given up trying to make patient feel better. Still trying.
Course of treatment and action was clear. Interacting with other family members at the meeting was also positive.
They didn't rush. Complimented caregivers on being supportive. Compassionate. Offered assistance beyond this hospital visit.
One doctor who came many times and made family comfortable with having one professional constant through whole experience.
They are very helpful. She talks to us. They give us up to date information about the patient.
Feedback was supportive. Overall great experience.
They finally listened.
The team seemed to care. They were concerned and wanted to help.
The team was very sympathetic to our needs and our father's needs.
They allowed us to express our opinions and feelings well. I saw the professionals' opinions and how well they were based on experience. They were very patient and attentive to us.

team, a key marker in the overall perception of care that they received. We believe that the JTOG could be used by other interprofessional palliative care teams to measure their family satisfaction markers.

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