

# Evaluation of a Teenagers and Young Adults (TYA) Multi-Disciplinary advisory Team (MDaT) online platform: perceived impact on team functioning and care of patients

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## Background

A core component of the Cancer Improving Outcomes Guidance is Multidisciplinary Team working. However, there are substantial time and resource constraints for a large number of professionals to attend additional meetings that may be required of MDT cancer care. This is particularly the case for the TYA clinical population as both paediatric and adult specialist services input across the south west is necessary in the diagnostic and treatment process. It was on this basis that the TYA Multi-Disciplinary advisory Team (MDaT) was developed using an online platform. A TYA MDaT is a secondary approach to determine the unique needs of the individual patient. In the context of Cancer Services this is a group of clinicians from a range of healthcare disciplines who come together online to discuss a patient with cancer between the ages of 16-24.

The European Commission Healthcare Telematics Program defines telemedicine as "rapid access to shared and remote medical expertise by means of telecommunications and information technologies, no matter where the patient or relevant information is located."

ISEEU™ Global

This pilot service innovation being evaluated has been possible through partnership working with ISEEU™ Global. This is a private healthcare IT organisation experienced in creating joined-up, flexible solutions to help deliver new ways of working. Their highly secure connectivity and data transfer technologies has enabled clinical staff to connect, transfer and share patient information in real-time.

## Purpose of Study

- To identify how the new virtual service/team functions
- Identify the perceived impact of the virtual MDaT on TYA patient care

## Methodology

TYA core team staff questionnaires were carried out at two time points. We also carried out an analysis of TYA MDaT cases over a specified sampling period. This Aston Inter-professional Team Working Inventory was used as a questionnaire to assess team functioning.

## Results

The questionnaires were given at two time points: commencement of the evaluation project (time point 1), and also at the end of the evaluation project (time point 2) to measure whether the process of the research, i.e. eliciting views and thoughts about the TYA MDaT may have influenced team functioning.

**Table 1.** Summary of data from core member questionnaires N=8 rating answers from 0-5

Category	Time Point 1		Time point 2	
	Median	Range	Median	Range
Shared commitment to goals and objectives	3.84	2.67-4.33	3.67	3-5
Independence of outcomes	4	3.5-4.5	4	3.5-4.5
Role clarity	3.5	1-5	4	1.6-4
Cultural understanding	3.25	1.5-4	3.5	3-4.5
Focus of quality and innovation	3.88	2.75-4.5	4	3.25-4.75
Co-operation	3	1.5-4.25	3.63	2.5-4.25
Inter-professional trust and respect	3.84	2.33-4.67	4.33	3.33-4.67

In summary, five out of the seven dimensions increased, one remained stable and one dimension decreased in terms of scoring over the eight month period of data collection for the present study.

Over the course of the six months, 17 new referrals were made to the service. Eight of the patients referred were female, nine were male. Their ages ranged from 16 to 25, and 76% were from Bristol, with the remaining 24% from the South West region. The following table illustrates the proportion of these 17 referrals where different professionals were given advice, information, or support relating to the corresponding dimensions to help meet the unique needs of the patients.

**Table 2.**

Psychological	Social work	Financial	Geographical	Clinical trials	Medical	Peer support	Family needs	Vocational
47%	100%	29%	35%	41%	100%	35%	47%	53%
N=8	N=17	N=5	N=6	N=7	N=17	N=6	N=8	N=9

Advice, support and information given over a 6 month sampling period. Of the 17 referrals, 59% were given advice in 5 or more areas, all referrals received advice in at least three areas. The median number of areas of advice given per patient was 5 (IQR, 3,6), and ranged from 3 to 8 areas of advice per referral.

## Discussion

We have investigated the functionality of teams using the online platform. Through this work we recognise the potential of this approach. It provides a more efficient and clinical effective service while overcoming logistical barriers regarding travel and access to age specific specialist advice. There are clearly further opportunities to be gleaned from this innovative development. Overall this project has been an insightful process to enable the development of new ways of working to meet the needs of cancer site specific and an age specific group of patients.

*'I think in theory it is a good process because the way it works where you can link into it from your place of work makes it easier to participate, also that you might choose to participate only when you have patients or discuss patients which you have useful input.'*  
(participant)

## Conclusion

We appreciate that this work is in its infancy and needs to be developed further. There is an opportunity to consider replicating this in other areas of cancer care and MDT meetings with further evaluation being part of that process. This would inform us all of the potential benefits of specific information technology vehicles to provide services that require national and local support. Our aim is to complement and add value to the services provided for all Teenagers and Young adults with cancer in our designated geographical area in the South West of England.

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