

CHANGING THE PARADIGM OF QUALITY TEACHING IN HEALTHCARE FOCUS ON MULTIDISCIPLINARY PATIENT CARE

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ABSTRACT

Most of the poor performance of health care due to lack of communication between professionals and the lack of practical training multidisciplinary (health is by nature a multidisciplinary activity.) It is therefore considered the introduction of a postgraduate training of pharmacists and physicians working in clinical analysis in collaboration with other health professionals through a new interdisciplinary approach and the definition of common objectives. This is intended to achieve an improvement in the quality of health care by putting more emphasis on patients, not only in the techniques. It includes the views of students (experts) on this multidisciplinary practice collected through a questionnaire.

Key words: Quality, multidisciplinary training.

RESUMEN

La mayoría de los escasos resultados de cuidados de salud se deben a la falta de comunicación entre los profesionales y la falta de formación práctica multidisciplinar (la salud es por naturaleza una actividad multidisciplinaria). Por ello se ha considerado la implantación de un postgrado para la formación de farmacéuticos y médicos que trabajan en análisis clínicos en colaboración con otros profesionales de la salud mediante un nuevo enfoque interdisciplinario y la definición de objetivos comunes. Así se pretende conseguir una mejora en la calidad de la atención sanitaria poniendo un mayor énfasis en los pacientes y no sólo en las técnicas. Se incluye la opinión de los alumnos (especialistas) sobre esta práctica multidisciplinaria recogida mediante un cuestionario.

Palabras clave: Calidad, práctica multidisciplinar.

INTRODUCTION

Quality, Quality techniques and Quality training traditionally have been mainly focused and introduced to professionals on mono disciplinary and technical approaches opposed to a global approach.

Most of healthcare poor results can be traced to poor communication between providers; the multidisciplinary practical training is a useful path to tackle this everyday problem in healthcare. Since healthcare is by nature a multidisciplinary activity a new approach has been tried for post graduated training of pharmacists and doctors working on clinical analysis, increasing interdisciplinary links and encouraging collaboration with other health care professionals, by defining common goals and patient interventions

MATERIALS AND METHODS

Two courses, sponsored by the Medical and Pharmaceutical Portuguese Societies, were conducted in Lisbon (at the Medical Society) and Oporto (at the Pharmaceutical Society) involving 50 pharmacists and medical doctors working in the clinical laboratory analysis area (clinical chemistry and laboratory medicine). Each of the two training courses had five working days duration included a training audit to a private clinical laboratory.

Resulting from these two courses a questionnaire was filled by the trainees (specialists with many years practice) and for this study only their opinion on the multidisciplinary was considered.

RESULTS AND DISCUSSION

In spite of being two different populations of healthcare professionals with the same scope of activity and consequently competing each other in the market it was possible to get a good team work and over 97% positive feed back on this kind of approach; the qualitative feed back included: the positive effect of experience exchange between the professionals, a better focus on the internal and external client, the impact of a "hands on approach" provided by the training of audits. The negative aspects pointed out were related to the short duration of the course.

CONCLUSIONS

This multidisciplinary approach for the training in Quality in healthcare emphasized the importance of the focus on the patient and the value of changing experiences between health care providers.

The complex settings of healthcare organizations ask for a new paradigm for the Quality in healthcare and a stronger focus on the patients and not just on techniques.

Future perspectives:

It is clear that teaching institutions have responsibility on health care and the involvement of pharmacy, medicine and nursing faculties should be one of the driving forces on this process.

In the future a further effort should be addressed at pre and post graduate level with focus on the demographic and nosologic evolution.

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