

Interdisciplinary – Transdisciplinary Care

Linda F. Piotrowski, MTS BCC
DHMC Palliative Care
NACC
June 7, 2012

1

Objectives

1. To examine the **idea** of interdisciplinary care and the **ideal** of transdisciplinary care.
2. Examine definitions of and differences between interdisciplinary and transdisciplinary care.
3. Explore the chaplain's role on the patient care planning team.

2

I coined the term “total pain,” from my understanding that dying people have physical, spiritual and psychological, and social pain that must be treated. I have been working on that ever since.



◦ Cecily Saunders, MD (as quoted in Smith, 2005)

3

Bio–psychosocial–spiritual care

As medical care evolves professionals are gradually moving toward providing care that is bio–psychosocial–spiritual.

4

Bio-psychosocial-spiritual care

The biological, the psychological, the social, and the spiritual are only distinct dimensions of the person, and no one aspect can be disaggregated from the whole.

Each aspect can be affected differently by a person's history and illness, and each aspect can interact and affect other aspects of the person.

5



People deserve total care where they can speak authentically about their illness and where their spiritual needs as well as their physical, social and emotional needs are addressed. Illness and dying are essentially spiritual processes in that they often provoke deep questions of meaning, purpose and hope. These questions can trigger a quest for answers. That quest is what many would call a spiritual journey and why some consider palliative care to be a “secular religious movement.”

(Duffy, 2009) Quoted in
Making Health Care Whole, Puchalski and Ferrell, 2010

6

Relationship and Patient Care

A cornerstone of philosophical anthropology is that human persons are intrinsically spiritual.

This is based on the notion of the human person as a being in relationships.

Sickness rightly understood is a disruption of right relationships.

(Sulmasy, D., 2002)

7

Relationship and Patient Care

Bernard Lonergan (1958) has argued that when one knows (literally) any “thing,” what one is really grasping is a complex set of relationships, whether that thing is a quark, a virus, a galaxy, or a patient.

Sickness, rightly understood, is a disruption of right relationships. It is not “looking at a bad body inside an otherwise healthy body.”

(Sulmasy, D., 2002)

8

Relationship and Patient Care

Illness disturbs relationships both inside and outside the body of the human person.

9

Relationship and Patient Care

Inside the body, the disturbances are twofold:

- (a) the relationships between and among the various body parts and biochemical processes

- (b) the relationship between the mind and the body.

10

Relationship and Patient Care

Outside the body, these disturbances are also twofold:

(a) the relationship between the individual patient and his or her environment, including the ecological, physical, familial, social, and political nexus of relationships surrounding the patient

(b) the relationship between the patient and the transcendent.

(Sulmasy, D. 2002)

11

Relationships

I. Intrapersonal:

A. Physical relationships of body parts, organs, physiological, and biochemical processes.

B. Mind-body relations—multiple relationships between and among symptoms, moods, cognitive understandings, meanings, and the person's physical state.

12

Relationships

II. Extrapersonal:

- A. Relationship with the physical environment
- B. Relationship with the interpersonal environment – family, friends, communities, political order
- C. Relationship with the transcendent

(Sulmasy, D., 2002)

13

Transdisciplinary Care

is a process in which health care professionals put aside their professional territoriality to listen and plan for the best possible care of a patient.

14

Transdisciplinary Care

Represents the highest progression in the process of patient care.

15

Transdisciplinary Care

Reaches into the spaces between disciplines to provide the best health outcomes possible through collaboration.

16

Care Planning Continuum

Unidisciplinary: Feeling confident and competent in one's own discipline.

Intradisciplinary: Believing that you and fellow professionals in your own discipline can make an important contribution to care.

Multidisciplinary: Recognizing that other disciplines also have important contributions to make.

Interdisciplinary: Willing and able to work with others in the joint evaluation, planning and care of the patient.

Transdisciplinary: Making the commitment to teach and practice with other disciplines across traditional disciplinary boundaries for the benefit of the patient's immediate needs. (UCPA, 1976)

17

Care Planning

Integrated, smooth, coordinated and congruent care, with the patient's immediate needs at the center of the effort, makes transdisciplinary care. Individuals come together without territorial professional boundary needs to guide their role and responsibilities. This is what makes it the highest form of care.

(Davis, C., 1998.)

18

Care Planning

Patient Care Rounds as well as Inter and Transdisciplinary Team meetings are sacred times in which the inherent value and respect needed for each person, staff, team member, patient and caregiver is held as sacred.

19

Each Team Member

Must:

- Remain open to learning from other team members
- Keep patient's needs and interests foremost
- Hold sincere appreciation for one's team members
- Respect the patient's knowledge of his or her own needs and resources

20

Chaplain Roles:

- ▶ Primary responsibility to patient is to complete a **spiritual assessment**
- ▶ Spiritual assessment enables chaplain to fulfill role as **advocate, educator and coordinator**

21

Spiritual Assessment protocols have become commonplace in the practice of professional chaplaincy in the health care setting. It is part of the observation, diagnosis and treatment to be provided by the spiritual care practitioner. Observing and sharing this information accurately with others on the medical team makes an important contribution to the care and healing of the patient.

Steven Spidell DMIN, BCC
Chaplaincy Today—volume 24 number 1—Spring/Summer 2008

22

Chaplain Role

The chaplain member of a team brings awareness of spiritual characteristics to the table while possessing the ability to listen at many levels to the various patient needs contributing not only from his or her field of expertise related to spirituality and religion but also to the contributions of other team members.

23

Questions to ponder

- ▶ Do you participate in care planning meetings?
- ▶ What descriptor would you give your team planning meetings?
- ▶ What role do you play in your meetings?
- ▶ Is this type of care possible given today's fiscal climate in healthcare?
- ▶ Is it possible to achieve transdisciplinary care?
- ▶ How do you envision care developing over the next 10 years?

24

Questions/Comments?

- ▶ Your turn to continue the conversations.

25

Resources

✱Davis, Carol. (1988) 4, 23–25
Kilgo J.L Aldridge J., & Denton B. (2003). Philosophical foundations of interdisciplinary in caring for the elderly, or the willingness to change your mind. *Physiotherapy Practice* (1988) 4, 23–25

✱Roberts, Stephen R. ed., *Professional Spiritual and Pastoral Care: A Practical Clergy and Chaplain's Handbook*. Woodstock, VT , Skylight Paths. 2012.

✱Ruddy G, Rhee K. Transdisciplinary teams in primary care for the underserved: a literature review. *J Health Care Poor Underserved*. 2005. May 16(2): 248–56.

26

Resources

- ✦ Sulmasy, D. (2002). A biopsychosocial–spiritual model for the care of patients at the end of life. *The Gerontologist* 42, Special Issue III, 24–33.
- ✦ UPCA 1976 Staff development handbook. A resource for the transdisciplinary process. Bureau of Education for the Handicapped, United Cerebral Palsy Association, New York. 1976.

27

For additional information:

Linda F. Piotrowski, MTS BCC
Pastoral Care Coordinator/Chaplain
Dartmouth–Hitchcock Medical Center
One Medical Center Drive
Lebanon, NH 03765
603–650–4992
Linda.f.piotrowski@hitchcock.org

 **Dartmouth-Hitchcock**
MEDICAL CENTER

28