

Developing a Performance Matrix for Multidisciplinary Teams

Introduction



While Multidisciplinary Teams (MDTs) are considered the gold-standard of care for cancer patients, their performance varies widely. Several validated tools exist to measure performance, however most involve observation and are resource intensive¹. The aim of this study was to develop a user-friendly, reliable and valid maturity matrix as a self-assessment tool for MDTs to monitor maturity and support them in improving performance over time.

Methodology

Capability maturity models have been developed to assist organisations in the private sector to improve operations and support performance improvement. This study adopted a 6-phase methodology developed by De Bruin et al² to develop a maturity model for cancer MDTs.

Phase 1: Scope

- The scope of the study was developed as part of the Tumour Program Strengthening Initiative with the aim of establishing an evolutionary path to strengthen MDTs until they reach maturity.

Phase 2: Design

- An MDT workshop, member survey, and literature review established how MDTs operated and the key constraints to optimal performance.
- Draft key performance indicators (KPIs) were developed.

Phase 3: Populate

- Using Delphi Methodology³, four iterations with a total of 30 participants were conducted to reach consensus on indicators and maturity levels.

Phase 4: Test

- The Maturity model was transformed into an online instrument which is currently being piloted.
- Statistical analysis will be conducted to measure validity, reliability and acceptability of the model

Phase 5: Deploy

- The model will be deployed across MDTs across NSW

Phase 6: Maintain

- The model will be continually reviewed and adjusted as needed.

Results

| Components | Indicators | Maturity levels | | | | |
|---|---|-----------------|---|---|---|---------------|
| | | 1 | 2 | 3 | 4 | 5 |
| Governance and Leadership | 1. Governance structure 2. Structured leadership 3. Clinical Governance | Most Basic | | | | Most advanced |
| Clinical discussion and decision making | 4. Locally endorsed protocols 5. Multidisciplinary decision making | | | | | |
| Meeting Organisation | 6. Operational procedures 7. Implementation of follow-up actions | | | | | |
| Patients and GPs | 8. Communication with GPs 9. GP access to specialist services 10. Patient centred care 11. Informing patient | | | | | |
| Data analysis and research | 12. Data collection and analysis system 13. Research program 14. Research informed by data analytics | | | | | |
| Infrastructure and workforce | 15. Meeting room and technical facilities 16. Administrative, clinical and data science staff 17. Education program | | | | | |

- Consensus was quickly reached for indicators with good internal consistency but maturity levels required additional input from a Delphi sub-panel.
- The final matrix consists of 17 indicators across 5 maturity levels, with a total of 85 items.
- To date 31 team members have piloted the matrix.
- Full statistical analysis will be conducted when sample size reaches 90.
- The average score for ease of use was 3.6/5 and for usefulness was 3.5/5.

Conclusion

- Early results for ease of use and usefulness of the maturity model indicate that it has potential as a tool for monitoring MDT performance.
- If reliability and validity of this tool are confirmed, it will be disseminated to other hospitals and health services.

Bibliography

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