

Good multi-disciplinary working is key to providing high quality patient care.

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Introduction

This work aims to establish a meaning of inter-professional, multi-disciplinary, multi-agency and collaborative working and evaluate its success or failure in the provision of good quality patient care. This work will identify models of teamwork and determine.

Historically, health and social care organisations have operated independently, each encompassing differing professionals and agencies (Carnwell and Buchanan 2009). Each organisation has operated within its own management structure, policies, procedures and codes of conduct (Glasby and Dickenson 2008). However, effective practice in the twenty-first century recognises that the needs of patients/service users/clients can seldom be met by a single agency, as patients frequently have complex needs which p both health and social care services (Callaghan et. al. 2009). Equally, during the past decade there have been a variety of changes in the context of health and social care provision in the United Kingdom (Carnwell and Buchanan 2009). Health and social care delivery is moving from the traditional acute care settings into community based settings and patient/client homes (NHS Institute for Innovation and Improvement 2006). This transition in service delivery requires health and social care agencies to work collaboratively, and in partnership with the patient/service user.

Currently there are a plethora of definitions/terminologies used to describe health and social care professionals and agencies working together. Glasby and Dickenson (2008) suggest that partnership/inter-agency working may be

defined as; health and social care agencies working cooperatively to provide cohesive care to patients/service users. Miers and Pollard (2009) suggest that 'interprofessional' working describes people belonging to a profession relating with one another for the mutual benefit of those concerned. This interpretation suggests a sharing of information and experience by professionals, resulting in a possible outcome unachievable by individuals (Mathias and Thompson 2001). Inter-professional working also incorporates an element of education amongst those involved, improving professional knowledge (Hammick et. al. 2009). A multi-disciplinary team is a term utilised to describe a group of professionals and other staff members, led by a team leader, working together to achieve a common objective (Fraser and Matthews 2008). Lowe and O'Hara (2000) suggest that multi-disciplinary teams aid the development of client focused services, promoting a holistic approach to care delivery. However, it may be argued that traditional professional boundaries are being blurred as professionals strive to deliver quality client-centred care, and this may be evident within multi-disciplinary teams (Baxter and Brumfitt 2008). Nonetheless, a multi-disciplinary team approach may result in an improvement in communication between healthcare professionals which leads to a more co-ordinated service delivery and lessens the likelihood of service users falling between services (Cook et. al. 2001).

Multi-agency working relates to several health, social care public, private sector and voluntary organisations working together on a specific task (Day 2006). It may be suggested that multi-agency working may bring agencies

together, but also suggests that whilst there is communication between the agencies there is little collaboration, merely the aim of completing the task (Day 2006). However, it is possible to challenge this perception as sharing professional knowledge provides the opportunity to work and learn from one another, resulting in collaborative working (Hammick et. al. 2009).

Collaborative working may be described as a complex multidimensional concept necessitating teamwork, communication, cooperation, multi-agency, multi-disciplinary and inter-professional interactions (Suter et. al. 2009).

Collaboration requires the sharing of information, knowledge and resources to achieve a desired goal (Suter et. al. 2009).

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