Allied health, information and informed consent



Allied Aspects of Healthcare Administration Multidisciplinary Care The multidisciplinary care refers to the doctors are specialists in different medical areas and work together to provide a comprehensive treatment plan to the patients. It is an integrated team approach in health care where medical and the allied healthcare professionals examine all the treatment options, which are relevant for every patient. The multidisciplinary care ensures efficient and effective care to patients suffering from chronic health conditions. The multidisciplinary teams involve people from many disciplines who come together in order to perform a common activity for the welfare of the patients. Multidisciplinary care ensures that the team members are able to discuss every aspect of psychological and physical needs of each patient. Multidisciplinary care approach fulfils the best and evidence-based practices for all the patients (Pozgar, 2012)

The multidisciplinary care is carried out since it represents the best practice of treatment planning for the patients. It entails a focus on continued care, the development of relevant referral networks that include appropriate pathways to enhance the psychological needs, the development of protocols and pathways for care and treatment. It includes the patients whose cases are discussed by multidisciplinary team.

Effective multidisciplinary care entails the improved coordination of the services, great opportunities for participation in clinical trials, improvement in treatment planning and outcomes, improvement in information sharing between the multidisciplinary team members, enhanced management and detection of the patients psychological and emotional needs, and the improved functioning of the team (Pozgar, 2012).

Clinical Legal Aspects of the Multidisciplinary Patient Care

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The multidisciplinary care has been incorporated in the national clinical practice frameworks, guidelines, frameworks and plans. The multidisciplinary team is focused in treatment planning where the health professionals meet and recommend a treatment plan. Not all the professional treat the patient; as a result, the issues on liability if the patient's condition worsened derail the multidisciplinary approach. As a result, before any multidisciplinary approach, they had to be the consent of the patient prior to the multidisciplinary meeting, the meeting outcomes should be documented, and the liability implication of the professional team members depended on recommendations of the individual practitioner (Magee, Laroche & Gilligan, 2001).

Patients should be informed about the multidisciplinary procedures and meetings, and they should have the information that will enhance their participation in development of care and treatment plans. The consent of the patient is sought before the meeting, and the informed consent entails the explanation of multidisciplinary meeting process, the attendees and the discussion areas including the clinical information, the treatment, and the supportive care. The consent should be recorded in the patients medical record.

The multidisciplinary team should give their recommendations based on the evidence and the acceptable best practice. The recommendations should be recorded in the patients medical record and should be signed by the treating technician. The private patients in multidisciplinary meeting should have their recommendations recorded and signed by the treating technician in the patient notes. The designated team member or the treating technician should convey the recommendations to the multidisciplinary team of the

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patient by providing appropriate information, which will enable the participation of the patient in the decision-making process.

The clinician and patients should devise the care plan and treatment that is most appropriate, and this is the one that is recorded in the medical record and presented to the multidisciplinary team based on the referral and communication protocols of the team (Magee, Laroche & Gilligan, 2001).

References

Magee, L., Laroche, C., & Gilligan, D. (2001). Clinical trials in lung cancer: evidencethat a programmed investigation unit and a multidisciplinary clinic may improve recruitment. [Letter]. Clinical Oncology (Royal College of Radiologists) 13(4), 310-11.

Pozgar, G. (2012). Legal Aspects of Health Care Administration (11 Ed). Sudbury, MA: Jones & Bartlett