

Abstract Form

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Title of abstract: Are we ready for virtual multidisciplinary team care?

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Background:

Bringing together clinicians across disciplines and locations for multidisciplinary team meeting (MDT) and shared care planning requires us to rethink traditional approaches. Face-to-face meetings become exceedingly difficult to organise. Our task was to design and implement a simple-to-use solution that manages all aspects of MDTs, works both onsite and virtually, and at the same time is fully interoperable with and adaptable to existing clinical workflows.

Aims:

A network of 120 medical specialists asked for an easy-to-use, mobile first and integrated solution to run multidisciplinary team meetings. They requested an end-to-end solution that would link clinicians from various locations to collaborate on internal and external patient cases; the ability to instantly share results with the whole care team and have a full record in the patient records.

Method:

With the support of the NSW Building Partnership Grant, together with the MDT coordinator and clinicians, we co-designed a mobile first workflow that allows them to manage all aspects of onsite and remote multidisciplinary team meetings. The aim was to fully digitize and shorten the process from an average of 27 days per meeting to under 10 days, as well as provide significant cost savings of an estimated \$1,000 per meeting associated with staff time, collecting and distributing information.

Rather than creating a new solution, the module was tightly integrated with the existing secure messaging platform, allowing clinicians to switch between a formal MDT meeting and ad hoc secure clinical information sharing 1-to-1 or 1-to-many.

Results:

The success of this project was due to active co-design and constant feedback from clinicians once they started using the online platform for their onsite meetings. Working closely with the MDT coordinator and clinicians allowed us to

understand and incorporate their feedback in all phases from conception, design, implementation and optimisation.

We designed and implemented a proactive user onboarding strategy, which helped with the introduction of a new workflow.

Implications that impact on your project:

We observed different user preferences and how important it was to reflect them in the way clinicians are onboarded to a new workflow and technology step-by-step. Supporting flexibility and modularity in workflows, combined with an easy-to-use design became key for the acceptance of the solution. Overtime, we observed a greater level of acceptance to virtualise elements of the process.

We have been approached by other telehealth programs to utilise the module for discharge management and remote/virtual patient handover manifesting the broader applicability due to the modularity of the solution.