Team Work & Nursing Care: a necessity into Community Health Care Services

Styliani G. Tziaferi¹

Editorial

A team, in order to be defined as a term and performed into a health system, is being created when: a) people are temporarily joining each other for a short or long period of time b) people are united for a common purpose and depending on the model of cluster c) different types of behavior come up till reaching maturity. Main objective goals of a team are: achieving common aims, maintenance and empowerment of the team and of the individuality of its members. Its type may be formal, informal, traditional or modern. Stages of the development of its dynamics start with the formulation, being influenced by brainstorming, moving into new attitudes and application of its aims.

When a team is effective? Once it is united, interdependent, stimulant, with positive climate, structured, with knowledge of the weaknesses and strengths, adaptive, having easily solutions or disagreements on a friendly basis. Its main characteristics are: co operation, roles' flexibility, counseling, exchange of aspects, repetition, re-evaluation and effective leadership.

Importance of team work in community health care (CHC) services is concluded in many international studies that underline its necessity and having it, as a paradigm to follow. In Australia, facilitation of team-working is the strategic key-point for the empowerment and maintenance of working force in CHC especially for non medical personnel. Productivity of physicians can be arisen especially when team management of primary care exists. Well educated and specialized nurses may upgrade CHC services in a system that promotes team, inter-professional co-operation.

In Canada, following guidelines and protocols based on evidence, is supported by team-working. Improvement of the quality of CHC services through inter-professional co-operation, may be achieved by common time spent for communication, overcoming inter-professional and inter-personal conflicts and

¹ Ass. Professor of Community Nursing, Dep. of Nursing, School of Sciences of Human Movement & Quality of Life, University of Peloponnese, Greece

2 S.G. Tziaferi

understanding members' roles, focusing an aim as a team.

In Germany, new approaches in care are needed since care models in chronic diseases need the use of teams of health professionals that are out on the fridge in this health system. Upgrade of the level of nursing education is a necessity since general physicians are not able to deal with future challenges on their own.

In Finland, in order to change theoretical and practical models of team working, a long-term process is a demand, which must having a common starting educational level, for all health professionals, not only within the country but in different educational systems in other countries as well.

In Japan, a study of Ushiro (2009), reports the first effort of using tools of measuring qualitative elements in health services and it is concluded that the use of a tool measuring co-operation between nurse-physician, may contribute into the establishment of standards in collaboration, in measurement of the frequency of team activity and in the verification of specific data that relate team work with the quality of care.

In United Kingdom, effective communication systems must be developed between head of teams in CHC, authorities and professionals that participate in CHC. Important element of success is the ability of flexibility and the treatment of health inequalities, which have to be in the vanguard of the roles played. Inter-professional collaboration is the key of the qualitative care towards patients.

Strategies of inter-professional education may contribute into the evolution of knowledge and skills that are required by patients and carers, if: a) aims are clear and commonly accepted b) mostly effective ways of care services are specific c) evaluation of co-operation between qualitative and quantitative approaches is empowered. Inter-professional education is necessary for an effective inter-professional collaboration in health care and in the intensification of the quality of health care. Emphasis must be given into educative programs with the incorporation of theoretical models of team-roles and with the practice of students in teams, more easily in the level of primary HC. State authorities, members of institutional committees and responsible persons for the education and the development of working force that help into the giving of CHC services, must take into consideration cost-effectiveness' analysis, quality of care, patient safety, role's boundaries of each member in the team and patient attitude. Quality in services given, includes evaluation of auxiliary staff, cleaners, security staff etc, that exist, as well.

In USA, employers, hospitals, home and chronic care services are obliged to recognize the special role of every health professional (especially in nursing) and to contribute into the learning of inter-professional harmonic collaboration. In 21st century, IMO reports that nurses are the largest group of health professionals (with members more than 3 millions) that are called to broaden their roles and their education, to take over responsibilities as: leadership, health politics, system improvement, research and evidence based practice, team work and inter-professional co-operation.

Whereas in Greece, studies report that confusion of roles and domains, lack of equal

communication and of continuous learning, decrease dramatically health human force content. Community, is a multi-professional working area. Good collaboration between health personnel, especially between nurses and physicians, influences the patient treatment and care. Measures that may attribute positively include: the definition of duties and responsibilities by state authorities and the training into inter-professional co-operation during education. Increase of staffing and upgraded synthesis of nursing personnel combined with the improvement of health facilities, could improve indexes of qualitative functions and efficiency within the health sector.

Key issues, for a successful development of team work in CHC services, starting from nurses-the largest group of health professionals- are: enactment of rules and laws, creation and effective application of modern models of team work. Also, organization of education, from the lowest to the highest level, based on commonly accepted aims, with means that promise quality and cultivate sense of justice. Especially in CHC sector, promotion of inter- professional training, aiming to the adaptation of a team work culture. Nevertheless, spiritual, cognitive, emotional and esthetic awareness of individuals, as a total of their ideals, apprehensions and values, those bind the life of a team, where they belong to.