



## ASSESSING TEAM ATTITUDES & FUNCTIONS ~A SET OF PRE & POST QUESTIONNAIRES~

Sun Country Health Region, IPCP&LE Initiative

#### Dear Team Member:

Please take a few minutes to thoughtfully answer these questions in regard to your current team(s). This evaluation should take about 15-20 minutes to complete. Your opinions are very important. Your assistance in this matter is greatly appreciated.

The measurement instruments included in this project are attached:

- 1. ATHCT Scale: Attitudes Toward Health Care Teams Scale
- 2. Team **Skills** Scale (TSS): a self-assessment instrument
- 3. Interprofessional Collaboration Scale (IPC): Team **function** from individual team members' perspective specifically, effectiveness of communication, accommodation and appearance of isolation
- 4. Team Fitness Tool

### **Attitudes Toward Health Care Teams Scale (ATHCT)**

We would like to know about your attitudes toward interdisciplinary health care teams and the team approach to care. By interdisciplinary health care team, we mean three or more health professionals (e.g., nurse, physician, social worker) who work together and meet regularly to plan and coordinate treatment for a specific patient population.<sup>1</sup>

"IN MY OPINION":	Strongly Disagree	Moderately Disagree	Somewhat Disagree	Somewhat Agree	Moderately Agree	Strongly Agree	
1.Working in teams unnecessarily complicates things most of the time	0	0	0	0	0	0	A1
2. The team approach improves the quality of care to patients	0	0	0	0	0	0	A2
3. Team meetings foster communication among team members from different disciplines	0	0	0	0	0	0	A3
<ol> <li>Physicians have the right to alter patient care plans developed by the team</li> </ol>	0	0	0	0	0	0	A4
5. Patients receiving team care are more likely than other patients to be treated as whole persons	0	0	0	0	0	0	<b>A</b> 5
6. A team's primary purpose is to assist physicians in achieving treatment goals for patients	0	0	0	0	0	0	A6
7. Working on a team keeps most health professionals enthusiastic and interested in their jobs	0	0	0	0	0	0	A7
8. Patients are less satisfied with their care when it is provided by a team	0	0	0	0	0	0	A8
9. Developing a patient care plan with other team members avoids errors in delivering care	0	0	0	0	0	0	A9
10. When developing interdisciplinary patient care plans, much time is wasted translating jargon from other disciplines	0	0	0	0	0	0	A10

<sup>&</sup>lt;sup>1</sup> Heinemann, Schmitt and Farrell (1994). Attitudes Towards Interdisciplinary Teams, all rights reserved

"IN MY OPINION":	Strongly Disagree	Moderately Disagree	Somewhat Disagree	Somewhat Agree	Moderately Agree	Strongly Agree	
11. Health professionals working on teams are more responsive than others to the emotional and financial needs of patients	0	0	0	0	0	0	A11
12. Developing an interdisciplinary patient care plan is excessively time consuming	0	0	0	0	0	0	A12
13. The physician should not always have the final word in decisions made by health care teams	0	0	0	0	0	0	A13
14. The give and take among team members help them make better patient care decisions	0	0	0	0	0	0	A14
15. In most instances, the time required for team meetings could be better spent in other ways	0	0	0	0	0	0	A15
16. The physician has the ultimate legal responsibility for decisions made by the team	0	0	0	0	0	0	A16
17. Hospital patients who receive team care are better prepared for discharge than other patients	0	0	0	0	0	0	A17
18. Physicians are natural team leaders	0	0	0	0	0	0	A18
<ol> <li>The team approach makes the delivery of care more efficient</li> </ol>	0	0	0	0	0	0	A19
20. The team approach permits health professionals to meet the needs of family caregivers as well as patients	0	0	0	0	0	0	A20
21. Having to report observations to the team helps team members better understand the work of other health professionals	0	0	0	0	0	0	A21

### **Team Skills Scale** (a self-assessment measure)

### Please rate <u>your ability to carry out each of the following tasks</u>:<sup>2</sup>

22. Function effectively in an interdisciplinary team	<b>Poor</b> 0	<b>Fair</b> 0	<b>Good</b> ○	Very Good ○	Excellent 0	TSS1
23. Treat team members as colleagues	0	0	0	0	0	TSS2
24. Identify contributions to patient care that different disciplines can offer	0	0	0	0	0	TSS3
25. Apply your knowledge of geriatric principles for the care of older persons in a team care setting	0	0	0	0	0	TSS4
26. Ensure that patient/family preferences/goals are considered when developing the team's care plan	0	0	0	0	0	TSS5
27. Handle disagreements effectively	0	0	0	0	0	TSS6
28. Strengthen cooperation among disciplines	0	0	0	0	0	TSS7
29. Carry out responsibilities specific to your discipline's role on a team	0	0	0	0	0	TSS8
30. Address clinical issues succinctly in interdisciplinary meetings	0	0	0	0	0	TSS9
31. Participate actively at team meetings	0	0	0	0	0	TSS10
32. Develop an interdisciplinary care plan	0	0	0	0	0	TSS11
33. Adjust your care to support the team goals	0	0	0	0	0	TSS12
34. Develop intervention strategies that help patients attain goals	0	0	0	0	0	TSS13
35. Raise appropriate issues at team meetings	0	0	0	0	0	TSS14
36. Recognize when the team is not functioning well	0	0	0	0	0	TSS15
37. Intervene effectively to improve team functioning	0	0	0	0	0	TSS16
38. Help draw out team members who are not participating actively in meetings	0	0	0	0	0	TSS17

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<sup>&</sup>lt;sup>2</sup> Hepburn, Tsukuda, and Fasser (1996), Team Skills Scale, all rights reserved

# Interprofessional Collaboration Scale<sup>3</sup> (Measures communication, accommodation and isolation)

	Strongly Disagree	Disagree	Agree	Strongly Agree	
1.The team has a good understanding about their respective responsibilities.	0	0	0	0	IPC-C
2. Team members are usually willing to take into account the convenience of individuals when planning their work.	0	0	0	0	IPC-A
3. I feel that patient treatment and care are not adequately discussed between and among team members.	0	0	0	0	IPC-C
4. Individuals on the team share similar ideas about how to treat patients.	0	0	0	0	IPC-A
5. Team members are willing to discuss individuals' issues.	0	0	0	0	IPC-A
6. Team members cooperate with the way care is organized.	0	0	0	0	IPC-A
7. Team members would be willing to cooperate with new, agreed upon practices.	0	0	0	0	IPC-A
8. Individuals are not usually asked for their opinions.	0	0	0	0	IPC-I
9. Team members anticipate when they will need others' help.	0	0	0	0	IPC-C
10. Important information is always passed between and among team members.	0	0	0	0	IPC-C
11. Disagreements within the team often remain unresolved.	0	0	0	0	IPC-C
12. Some individuals think their work is more important than the work of others on the team.	0	0	0	0	IPC-I
13. Some individuals would not be willing to discuss new practices with other team members.	0	0	0	0	IPC-I

IPC-C (Communication), IPC-A (Accomodation), IPC-I (Isolation)

<sup>&</sup>lt;sup>3</sup> Kenaszchuk C, Reeves S, Nicholas D, Zwarenstein M. Validity and reliability of a multiple-group measurement scale for interprofessional collaboration. *BMC Health Services Research* 2010;10.

#### **Team Fitness Test<sup>4</sup>**

Rate each of the following statements as it applies to your team using the following rating scale:

This statement <u>definitely</u> applies to our team.	4
This statement applies to our team most of the time.	3
This statement is <u>occasionally</u> true for our team.	2
This statement does not describe our team at all.	1

Enter the score you believe appropriate for each statement beside the statement number on the Scoring Sheet.

1. Each team member has an equal voice.
2. Members make team meetings a priority.
3. Team members know they can depend on one another.
4. Our mandate, goals, and objectives are clear and agreed upon.
5. Team members fulfill their commitments.
6. Team members see participation as a responsibility.
7. Our meetings produce excellent outcomes.
8. There is a feeling of openness and trust in our team.
9. We have strong, agreed upon beliefs about how to achieve success.
10. Each team member demonstrates a sense of shared responsibility for the success of the team.
11. Input from team members is used whenever possible.
12. We all participate fully in team meetings.
13. Team members do not allow personal priorities/agendas to hinder team effectiveness.
14. Our roles are clearly defined and accepted as defined by all team members.
15. Team members keep each other well informed.

 $<sup>^4 \ \</sup>text{Geriatric Interdisciplinary Team Training Program: John A. Hartford Fdn: http://www.gittprogram.org/index.html} \\$ 

This sta This sta	tement definitely applies to our team.  tement applies to our team most of the time.  tement is occasionally true for our team.  tement does not describe our team at all.
16.	We involve the right people in decisions.
17.	In team meetings we stay on track and on time.
18.	Team members feel free to give their honest opinions.
19.	If we were asked to list team priorities, our lists would be very similar.
20.	Team members take initiative to put forth ideas and concerns.
21.	Team members are kept well informed.
22.	We are skilled in reaching consensus.
23.	Team members respect each other.
24.	When making decisions, we agree on priorities.
25.	Each team member pulls his or her own weight.