

# Evaluation of the effects of systemic further training of an interdisciplinary team at an acute psychiatric ward for adolescents

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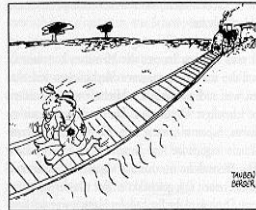
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## Introduction

Frequent escapes, violent incidents and discontinuation of treatment by adolescents and badly thought out division processes, a lack of learning culture, problem and deficit orientation and a lack of strategies for understanding and increasing the individual effectiveness of employees correlate with high early termination rates, lower job satisfaction and unsatisfied adolescents, parents and referrers. At this interface between organisational development and

treatment quality, the working situation of the employees is investigated and new treatment routines are established. The aim of the study (from an evaluation perspective): to determine job satisfaction and test the hypothesis that job satisfaction can be improved through interdisciplinary team training on systemic theories and techniques.



If the track doesn't split soon, we're done for!

## Methods

The investigation was carried out in a pre-post design. Shortly before (= t0) the further training (3 x two days within 6 months), half a year after it (= t1) and 5 years later (= t2), a questionnaire to determine job satisfaction (QDJS) was distributed to all employees on the ward (with intervention = WwI); for t0 and t2 it was also given to all employees on another adolescent psychiatric ward (without intervention = WwoI) (response rate > 95%). In addition, a partially structured interview<sup>1,2</sup> was carried out with representatives of various professional groups within the team which was trained between six months and one year after intervention. The questions were what works in clinical practice and what effects could be seen on team cooperation and individual professional identity. New changes in reporting systems were also part of the intervention, alongside the training:

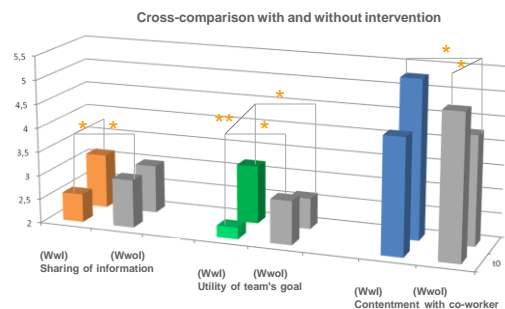
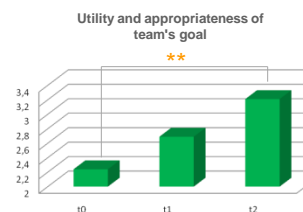
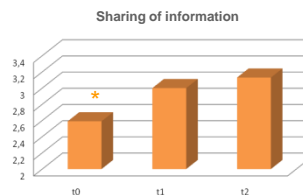
## QDJS: Questionnaire to determine job satisfaction

### Systemic hand-over report

The "new" incoming shift takes on responsibility for the hand-over (relief of the shift which is leaving). Based on the entries in the clinic's information system, hypotheses are formed and discussed in advance. Guided by these ideas, employees from the new shift ask employees from the old shift questions (circular) and develop new views or measures from their responses.<sup>3</sup>

### Case review with adolescents

The adolescent is present throughout and takes on an active, responsible role appropriate to their age. The team discusses matters in a way which is resource and solution-oriented but, importantly, also discusses critical topics. Transparency is created for the adolescents about what will be done with them and why. The active principle is the reflecting team; the team "on" the young person, then the adolescent and support person on what they have heard.



Graphs left:  
Determination of job satisfaction at times t0-t2 for all employees at the ward with intervention

Graph right:  
Determination of job satisfaction in cross-comparison between the wards with and without intervention

## Conclusions

Interdisciplinary further training in the form of team training leads to a measurable improvement in the team environment and an intensification of cooperation. Increased sharing of information and mutual development of ideas which involves everyone (including patients and relatives) also increase the security of treatment. The team's goal is increasingly found to be beneficial and appropriate, allows orientation and helps to form identity. The achievement of the highest possible performance standard becomes a team and not (merely) an individual concern. Systemic hand-over reporting and standardised, active participation of adolescents in their case reviews lead to more transparency and valuable communication culture which contributes to the success of treatment.

## Interview results

- 90% of adolescents use case review, very positive response, catalyst for motivation and cooperation
- new individual employee identity, "people listen to you",
- streamlining of reporting system, more time for contact with adolescents, closer to adolescents and family
- mutual appreciation, stop to destructive "mental hygiene"

## References

<sup>1</sup>Zwack, J., Schweitzer, J. (2008). Multiprofessionelle systemisch-familientherapeutische Teamweiterbildung in der Akutpsychiatrie: Auswirkungen auf die Teamkooperation und die Mitarbeiterbelastung. Psychiatrische Praxis 35 (1), 15-20  
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<sup>3</sup>Barry, M. (2000). Die Übergabebesprechung: eine systemische Perspektive. Verlag Hans Huber, Bern