

The effect of complementary therapies on multidisciplinary teamwork in palliative care

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RESULTS

Acceptance and appraisal

The majority of participants spoke of how complementary therapies had gradually become more accepted and valued over time in their hospice and all members of the multidisciplinary team identified mutual appraisal and respect as a basis for the long-term survival of complementary therapies in the hospices:

„We are all interlinked and interwoven and this is what makes it all so precious. Shiatsu or Craniosacral therapy each on its own would not last long, if they were not supported by all of us.”

(Mark, nurse)

Enhancing communication

Complementary therapies enhance constant communication between internal and external team members. For complementary practitioners it is crucial to receive feedback from nursing staff about the physical and emotional well-being of the patients. The majority of participants in the focus groups stress that regular communications are crucial to provide high quality end-of-life care.

„I can only work here because you appreciate what I do, and because of the close cooperation and the fact that I am part of this team and not somebody coming from outside.”

(Eva, Craniosacral Osteopathy therapist)

Awareness of professional limitations

Complementary therapies help to increase an awareness of the particular professional limitations of each discipline, which gives great relief to individuals.

„We all reached our limits. And then we asked ourselves: what else can be done? And since the art therapist has joined in and we know the patient can open up this way, I feel much better and more relaxed about her in her day-to-day life.”

(Mary, nurse)

Crossing professional boundaries

At times internal as well as external team members in the hospice are crossing these professional boundaries, more or less aware of doing so:

„And I did this once at the very beginning: I opened the crown chakra. And ...I caught myself thinking: that's not part of it here. That's my private me coming in, there it is again, this border.”

(Linda, nurse)

New insights on patients

Through multidisciplinary communication between nurses and complementary practitioners, new perspectives and insights on patients can be gained:

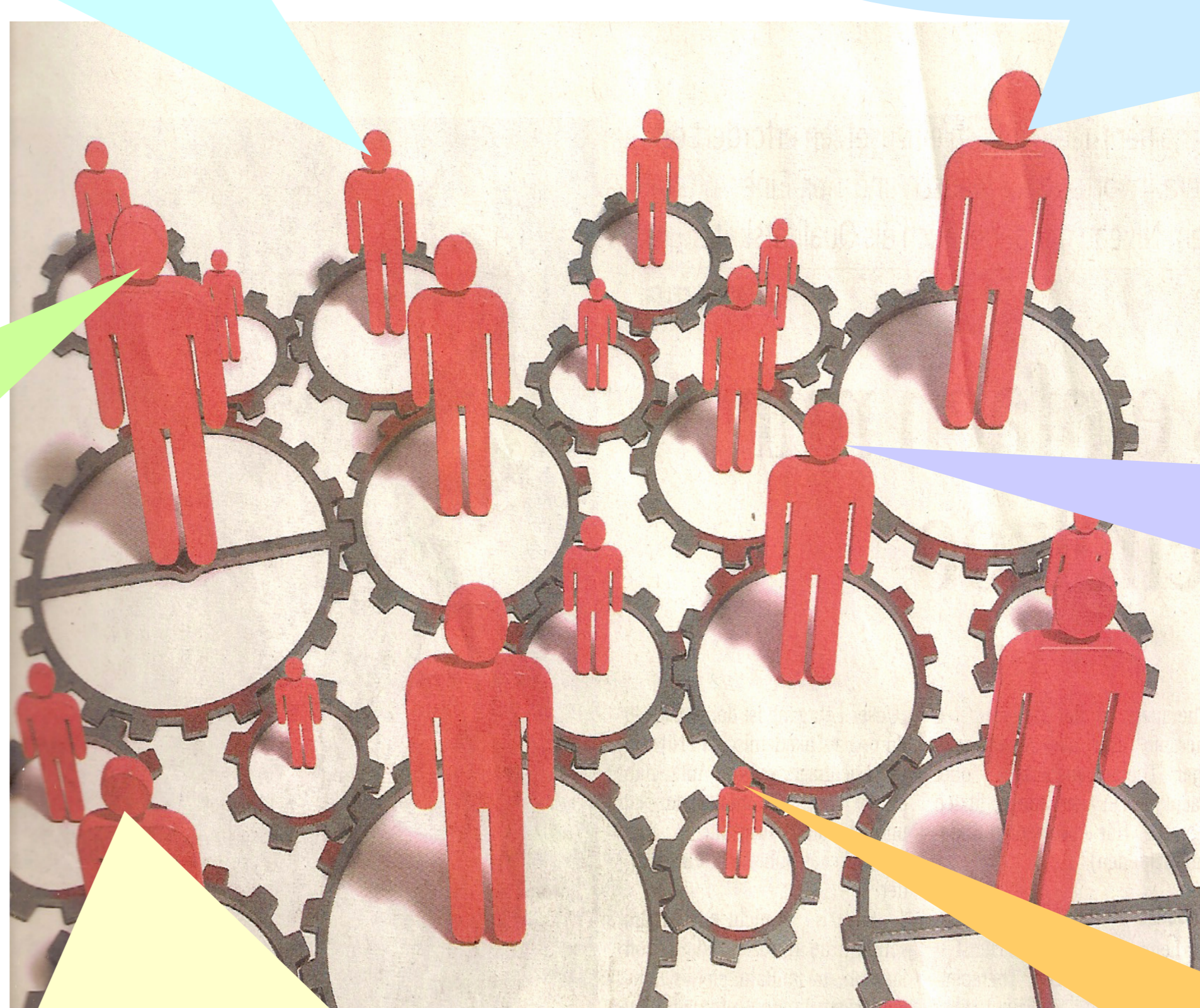
„And looking at a guest from a different angle we can experience her/him differently, too. In Shiatsu, in Craniosacral Therapy s/he can show a different side of her/himself, which we would not see otherwise. (...) and when restless persons suddenly calm down in this treatment, or even start talking about it,- which they would normally not do when they are with us – well, this adds a new perspective.”

(Leona, nurse)

An art therapist often uses meditation when patients are too weak for painting; once she also started massaging the feet of a patient:

„It also happened to me once, I was with a woman, and we talked about colours and so on. And she didn't want to paint. And all of a sudden I found myself massaging her feet. I am trained in that, too. Was wondering if that was ok here. But it simply seemed to fit.”

(Patricia, art therapist)



BACKGROUND

The interdisciplinary nature of hospice and palliative care addressing mind, body and spirit in the care of its patients, seems to dovetail with the nature of complementary therapies [1]. That is why hospice and palliative care providers in the United States and in Europe increasingly recognise the value of complementary therapies in end-of-life care [2]. Although there are a growing number of studies focusing on the use of complementary therapies for e.g. symptom control, nausea, anxiety or for improving the quality of life of the dying and their primary caregivers [3], little is known about the effect of complementary therapies on multidisciplinary teamwork in palliative care.

AIM

This paper explores the effect of complementary therapies on multidisciplinary teamwork in palliative care and hospice work as well as the interplay between internal team members and external complementary therapists. It focuses on the question if and how complementary therapies are a prerequisite for and enhance multidisciplinary teamwork in palliative care.

METHODS

As part of an exploratory ongoing study about complementary and alternative therapies provided in inpatient hospices in Germany, focus groups (n=3) and qualitative interviews (n=7) with external team members (complementary practitioners and doctors) based in three inpatient hospices in Germany, were conducted between May 2009 and May 2010. The mean length of the focus groups was 1 hour and 40 minutes; the interviews lasted between 30 minutes and 1 hour 45 minutes. Between 5 and 7 team members participated in each focus group. Focus groups and interviews were tape-recorded, transcribed verbatim and analysed using grounded theory methods [4].

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CONCLUSION

- The application of complementary therapies in palliative care and hospice work requires and enhances appraisal within the team as well as staff communication and so signifies the high quality of multidisciplinary teamwork in palliative care.
- The awareness of professional limitations, triggered by external practitioners, on the one hand can bring relief to team members, but on the other hand can be the cause for team conflicts if borders are not clearly defined or professional boundaries are crossed by individuals.
- The interplay between internal and external team members is crucial, not only for the provision of high quality end-of-life care, but also for balancing organisational ambivalences in the hospice: The application of complementary therapies impedes tight organisational structures and assembly-line care.
- This requires awareness of hospice managers who should offer organisational frameworks which enable and foster communication between complementary therapists and the rest of the multiprofessional team.

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