

Improving the Efficiency of Breast Multidisciplinary Team Meetings: A Toolkit for Breast Services

Section 12: MDTM Audit Tools

In addition to MDT-MeDiC (See Section 7) and MDT-ATLAS (See section 5) there are a number of other validated tools available that can assist review of MDTM efficiency and MDT performance:

MDT-MODE [decision-making and teamwork]

MDT-MODE¹ is an evidence-based tool for the observational assessment of teamwork and clinical decision-making in cancer MDT meetings. Since its conception in 2010, MDT-MODE has been used to assess the quality of thousands of MDT case discussions, across 6 major tumour types in over 7 countries across the globe.

MDT-MODE is designed to provide a comprehensive and objective assessment of information sharing and team behaviours, and can be used by clinical and nonclinical personnel. MODE generates a composite quality score from 13 different parameters, which can be aggregated across meetings, or compared to other metrics, such as team composition, tumour type, time per case, providing a flexible metric for assessing a number of different key performance indicators.

MDT-MODE LITE [decision-making and teamwork]

MODE-LITE is a validated observational assessment tool, based on MDT-MODE, which has been streamlined for routine clinical use. The psychometric properties of the 13-domains in MODE have been condensed to 6 domains, and the 5-point likert scale reduced to 3. The result is a tool that retains the robust validity of MODE, but which is quicker and easier to use in a clinical setting.

MDT-QuIC [discussion checklist]

MDT-QuIC² is an evidence-based checklist, designed to be used to support comprehensive, patient-centered decision-making in MDT meetings. MDT-QuIC has been validated with experts and end users and has demonstrated improvements in MDT quality and efficiency when used as part of a QI bundle in clinical trials. MDT-QuIC can be used either as a checklist for decision-making, or as an aide memoir for the MDT chairperson. It may also be used to structure referral documentation or the recording of MDT outcomes. This flexible tool can be used in conjunction with other tools, such as MDT-MODE, and MeDiC as part of a comprehensive MDT-streamlining strategy.

MDT-FIT [self-assessment and quality improvement platform]

[MDT-FIT](#) is a web-based platform that enables individual MDTs, Trusts and networks to complete and oversee a three-stage process, incorporating self-assessment against the characteristics of an effective MDT, independent observation (using observational assessment MDT-MOT³, and survey MDT-TEAM⁴), anonymised feedback, and facilitated team discussion. The aim is to improve quality of service and benefit patient care. It facilitates team working and quality improvement at low cost and takes little time. It is also repeatable, allows issues to be prioritised and supports 'benchmarking' across teams and services.

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MD-FIT allows cancer teams to self-assess against defined standards to improve functionality, and to do this anonymously so people can be empowered and honest about their team and the care they deliver. To identify what teams do well and what needs to be improved. To give teams a toolkit to prioritise areas for improvement, then the framework to develop and effect quality improvement projects. To empower team members to make differences to care with minimum investment in time away from patient care, at minimal cost.

MDT-ORAS [observational assessment of meetings]

MDT-ORAS⁵ is an observational assessment tool based on the characteristics of effective teamwork presented below and developed by the National Cancer Action Team. MDT meetings are recorded to allow assessment using the tool.

Team Climate Inventory [participatory safety, vision and team effectiveness]

Team Climate Inventory⁶ is a short questionnaire exploring team vision, participatory safety and team effectiveness. It can be used on its own or in combination with other tools presented here.

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References:

1. Lamb B, Wong H, Vincent C, Green JSA, Sevdalis N. Teamwork and team performance in urological multidisciplinary cancer teams: Development and evaluation of an observational assessment tool. *BMJ Qual Saf* 2011;20:849-56. <https://www.ncbi.nlm.nih.gov/pubmed/21610266>
2. Lamb BW, Sevdalis N, Vincent C, Green JSA. Development and evaluation of a checklist to support decisionmaking in cancer multidisciplinary team meetings: MDT-QuIC. *Ann Surg Oncol* 2012;19:1759-65. <https://www.ncbi.nlm.nih.gov/pubmed/22207050>
3. Harris J, Taylor C, Sevdalis N, Jalil R, Green JSA. Development and testing of the cancer multidisciplinary team meeting observational tool (MDT-MOT). *Int J Qual Health*. 2016;28(3):332-338. <https://www.ncbi.nlm.nih.gov/pmc/articles/PMC5892160/>
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5. Taylor et al. Measuring the quality of MDT working: an observational approach. *BMC Cancer*. 2012;12:202. <https://bmccancer.biomedcentral.com/articles/10.1186/1471-2407-12-202>
6. Kivimaki M, Elovainio M. A short version of the Team Climate Inventory: development and psychometric properties. *J Occup Organ Psychol* 1999;72:241-6. <https://onlinelibrary.wiley.com/doi/abs/10.1348/096317999166644>