

NZFPMS: Patient guide to the Multidisciplinary Team Meeting

A guide to the multidisciplinary team process.

What does a multidisciplinary team approach mean for me?

The purpose of this document is to help you understand multidisciplinary care and what a multidisciplinary team meeting is.

Multidisciplinary care is a team approach to health care. Doctors, nurses, allied health professionals such as physiotherapists, pain specialists and other professionals who have skills in diagnosing and managing complications from surgical mesh used to treat Stress Urinary Incontinence and Pelvic Organ Prolapse, will meet to discuss options about your history current and possible treatments and ongoing care. They will develop an individual treatment plan for you based on published evidence and best practice. This plan will be discussed with you.

Research shows that it is beneficial to involve a range of professionals in considering and recommending the best care for you.

For example:

- Each member brings a different area of expertise.
- Each member of a multidisciplinary team has a different perspective so the team as a whole can consider a wider variety of physical, social, cultural, and emotional needs and how to support you to meet them.
- A multidisciplinary meeting makes it easier to plan treatment, streamlines referrals and prevents unnecessary tests, saving time and resources for you and the team.
- It is evidenced that when patients have information about treatment options, their mental health and wellbeing can improve.

What is a multidisciplinary team?

The New Zealand Female Pelvic Mesh Service (NZFPMS) has a wide range of health professionals involved in assessing, planning and treating you. Each team member brings different skills that are important to managing your care.

Team members include:

- Surgeons credentialled for revision and removal of female pelvic surgical mesh and reconstruction following removal. They are credentialled to Tier 3 of the New Zealand Framework. You can read more about this [HERE](#)
- Clinical Nurse Specialists (CNS)
- Surgical Mesh Navigators
- Allied health professionals – including pelvic health physiotherapist, occupational therapist, social worker, dietician, pharmacist, clinical psychologist, pain psychologist and sexual health therapist.
- Pain medicine specialists
- Radiologists
- A colorectal surgeon and/or a specialist orthopaedic surgeon.

NZFPMS: Patient guide to the Multidisciplinary Team Meeting

To make sure you are receiving the best possible care, the team will meet to review your case at a Multidisciplinary Meeting (MDM) to discuss your case, consider the evidence and recommend the most appropriate treatments for you.

The MDM team is responsible for:

- Working out your treatment plan
- Deciding on further tests
- Making appropriate referrals to other specialist services
- Collecting information and keeping good records.
- There may be some people at the meeting who are not directly involved in your case. This is explained more below.

What happens at a multidisciplinary meeting?

During the meeting the team will review your medical and surgical history and your investigation results. Personal or other health information that you have disclosed to your health providers, including your general practitioner, may be shared at the meeting only if it is relevant to your diagnosis or treatment, unless you request otherwise.

Everyone at the meeting is bound by a confidential agreement, just as they would in a face-to-face consultation with you. We also have measures in place to ensure we are compliant with the Health Information Privacy Code and the Privacy Act 2020.

Do I have to be discussed at one of these meetings?

It is part of the NZFPMS national model of care to ensure that all patients referred to the service are presented and discussed by the panel of experts to ensure that all treatment options are considered and that recommendations are evidenced based and reflect the patients' goals of treatment.

It is important to know that there may be health professionals present at the meeting that you may not have met. Please be assured that all members are bound by a confidentiality agreement and that the Chair of the MDM is responsible for checking all participants have a role in the MDM process and have a confidentiality agreement in place.

If you are concerned about who is present during the discussion of your case, please discuss this with your CNS or the Navigator, who will work through your concerns with the MDM Coordinator and Chairperson.

If decide you do not want the team to discuss your case, you must advise either the Navigator or CNS before the intended meeting.

How will I know when my case is being discussed?

The CNS will advise you of when your case is being presented at MDM, this is generally after investigations result have been returned and we have the appropriate information to consider evidence and what treatment options might support your goals of treatment.

Generally, your case will be discussed only once, but occasionally we need to discuss it a second time. You will be informed of the plan to present your case and we will seek your verbal agreement to present your case to the MDM panel.

NZFPMS: Patient guide to the Multidisciplinary Team Meeting

When the CNS asks for your agreement, they will also explain what happens after the MDM. If you have an approved ACC claim and the MDM recommend an action that we ask ACC to fund, we will ask for your agreement to share the MDM outcome with your ACC Recovery Coordinator to facilitate their consideration of the request.

Can I attend one of these meetings?

You will not be invited to attend the meeting, as the team will discuss several other patients at the same meeting and need to keep their information confidential as well.

What happens after the meeting?

After the meeting, either the CNS or your surgeon will call you to tell you what was discussed and what course of action the team recommends. You will have the opportunity to ask questions and indicate any preferences you have for treatment. The final decision about your care plan is made in consultation with you.

The MDM discussion is written up and approved by the MDM Chairperson, a copy is kept in your clinical records.

If the recommendations include information relevant to your family doctor (GP) we will send them a copy of the outcome form. We will also ask you permission to share the outcome form with your ACC Recovery Coordinator if the recommendation includes an action that requires their consideration to fund.

What if I have a question?

The CNS is your link between you and the team. We will write letters to your general practitioner to keep them informed too.

If you have any questions about your team, or about the meeting at which your case will be discussed, please contact the Navigator or CNS.

What if I have concerns?

If you have any concerns about your treatment and you do not feel you can raise it with your named CNS or Navigator, you can email a request to have a phone call with the NZFPMS Administration Lead who will escalate it to an appropriate manager. You can send your request to nzfpms@tewhatuora.govt.nz with Attention: Administration Lead.

Alternatively you can contact the hospital Customer Service team by following this link, for patients supported by the Northern team [Waitemata: tell-us-what-you-think](#) or this link if you are supported by the Southern team [Waitaha Canterbury: tell-us-what-you-think](#)