Critical Analysis of Multidisciplinary Teams' Impact on Patient Safety in Saudi Hospitals

ESSA YASSEN ESSA ALSHEIKH[1], MOIED AWAD MOHAMMAD ALGARNI[2], NAIF SALEH AHMED ALGHAMDI[3], FAHAD ABDULRAHMAN ALHARTHI[4], ABDULLAH ABDULRAHMAN ALQAIMA[5], ALWAN ABDULLAH AHMED ALALWAN[6], ADEL ALI GANDAN ALKHIWANI[7], TALAL AHMED SAUD ALYAMI[8], MANSOOR SALEH SAUD AL TAISAN[9], HUSSEIN MOHAMMED HUSSEIN BANI HASHAISH[10]

Abstract

The delivery of healthcare in Saudi Arabia has undergone a transformation at some stages, with special emphasis on the use of MDTs in order to improve the safety of patients. In this paper, the author showcases a critical evaluation of the factors associated with patient safety enhancement in Saudi Arabian hospitals through MDTs concerning communication, role definition, and decision-making. Consistent with a mixed-methods approach, the study demonstrates the difficulties these teams encounter and how such difficulties affect safety processes, such as errors and patients' satisfaction. Specific recommendations for enhancing MDT effectiveness are provided to reflect on Saudi Arabia's Vision 2030 goals in healthcare.

Keywords: *Multidisciplinary Teams, Patient Safety, Saudi Hospitals, Healthcare Collaboration, Vision 2030.*

Introduction

The Evolution of Multidisciplinary Teams in Saudi Healthcare

The problem of patient safety as one of the key aspects of the quality of provided medical services cannot be overestimated. Healthcare organizations worldwide are practicing new procedures to decrease medical mistakes and enhance patient outcomes. In Saudi Arabia, using MDTs has become one of the strategies for using the activities and accomplishing the goals within the Vision 2030 framework. This organization-wide change focuses on healthcare paramountcy, putting MDTs at the forefront of patient-directed care.

MDTs are made up of professionals working in similar fields who come together to provide the patient's overall care. The diversity of patterns and talent enriches the decision-making system, minimizing risk chances while growing effectiveness. In Saudi hospitals, MDTs have a key place in high-risk zones, including intensive care units and emergency departments, where time frames for decision-making are stringent. However, adapting MDTs and providing motor development therapy in the Saudi environment has several challenges, cultural and organizational, including cultural and power differences at the workplace and, therefore, the overall absence of a unified practice.

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[1] Dammam Medical Complex, Saudi Arabia, Email: ealsheikh@moh.gov.sa
[2] Dammam Medical Complex, Saudi Arabia, Email: moiedaa@moh.gov.sa
[3] Dhahran Eye Specialist Hospital, Saudi Arabia, Email: nalghamdi1@moh.gov.sa
[4] Patient Services, Saudi Arabia, Email: FALHARTHY1@moh.gov.sa

[5] Ministry of Health, Saudi Arabia, Email: aalqaima@moh.gov.sa

[6] Ras Tanura Hospital, Saudi Arabia, Email: Aaalalwan@moh.gov.sa

[7] Ras Tanura Hospital, Saudi Arabia, Email: Aalkhiwani@moh.gov.sa

[8] Ras Tanura Hospital, Saudi Arabia, Email: talyami@moh.gov.sa

[9] Prince Sultan Center in Najran, Saudi Arabia, Email: sagr20z@hotmail.com

[10] Najran cluster, Saudi Arabia, Email: hbanihashaish@moh.gov.sa

As part of this article, the effects of MDTs on patient safety in Saudi hospitals will be analyzed based on the achievements of using these teams and the obstacles met along the way. The discussion provides considerations for enhancing the MDT with reference to the targets of the Saudi Arabian healthcare system to enhance comprehension of MDT effectiveness based on data from recent studies and real cases.
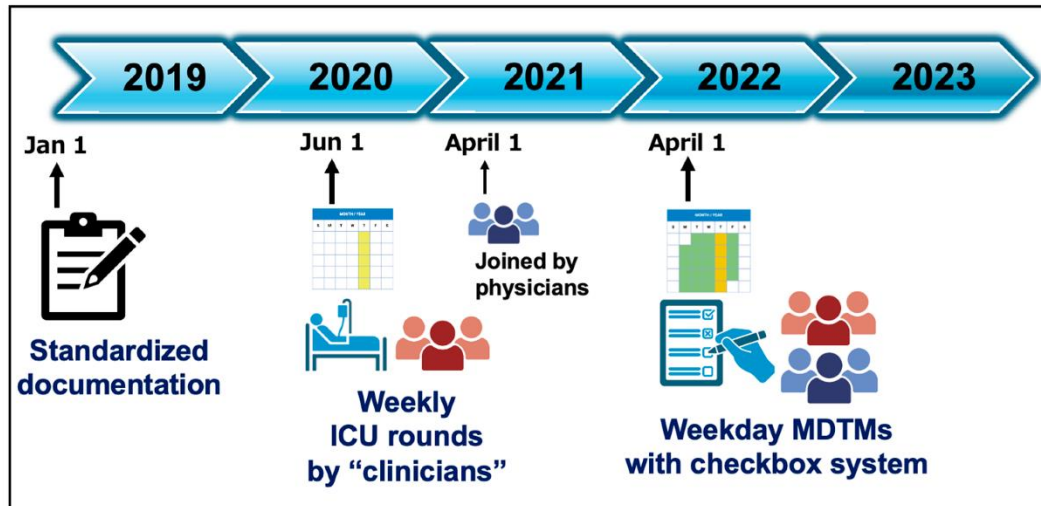
The Role of Multidisciplinary Teams in Enhancing Patient Safety

MDTs have received international appreciation for addressing the implementation of patient safety through collaboration and communication among the health care team members. MDTs have gradually changed patients' clinical outcomes in Saudi Arabia, mainly with the velocity of complicated cases. The idea is that having more people involved guarantees a detailed approach is used in making decisions about a patient's treatment, which helps avoid numerous mistakes common when a few specialists work on the case.

An important advantage of MDTs is the ability to decrease the number of medical errors. If executed effectively, the strategy helps the team learn of risks and act on them from an early stage. For instance, in ICUs, MDTs often discuss patients' conditions to change the treatment regimen and thus decrease the rates of adverse events. Also, the open fault attribution in MDTs was shared to reduce blameworthy accountability for mistakes by the crew members of Vertex.

However, these benefits notwithstanding, MDTs' success primarily rests with the quality of interprofessional relationships. Lack of clarity in communication patterns, lack of clarity in role assignments, and lack of openness to working together may wreak havoc on an organization's accomplishment of its objectives. Research evidence indicates that MDTs in Saudi hospitals face such challenges, suggesting the desirability of support strategies for promoting key teamwork aspects.

*Barriers to Effective MDT Implementation in Saudi Hospitals*

Although MDTs are advantageous in many ways, their integration into Saudi hospitals is accompanied by a number of drawbacks. One of the major challenges of the practice setting is the bureaucratic structure of healthcare organizations and the extent to which this setting imprisons, rather than encourages, creative expression and free-flowing information exchange among organizational members. Though it is well understood that MDTs aim to take advantage of various ideas and approaches, junior team members are unlikely to express their opinions.

Cultural diversity within the Saudi healthcare workforce makes MDT complex. Given that most linguists and cultural professionals are employed in these workplaces, communication is usually a worry. Intermodel communication gaps in language and cultural perception give rise to ineffective MDT communication discords and decision-making.

However, there is a problem because Saudi hospitals do not have agreed-upon protocols guiding MDTs, intensifying these problems. Such an approach is disadvantageous because it creates confusion in teams since members do not know who does what and thus leaves room for sloppy work. From the same study, Al-Yami et al. (2020) noted that role ambiguity remains prevalent in most Saudi MDTs, leading to some of the assignments being doubled or others remaining undone. Some of these barriers include a lack of. One can conclude that surmounting those barriers is critical to achieving the desired gains in patient safety by improving MDTs.

Impact of Vision 2030 on MDT Development

The custodians of the healthcare sector reform in Saudi Arabia are the key factors that have embraced MDTs through Vision 2030. Focusing on patient needs and calling for continuous quality improvement has laid the basis for MDT development in Vision 2030. The initiative also understands that multidisciplinary working across clinical professionals is in the best interest of obtaining the set safety and quality objectives.
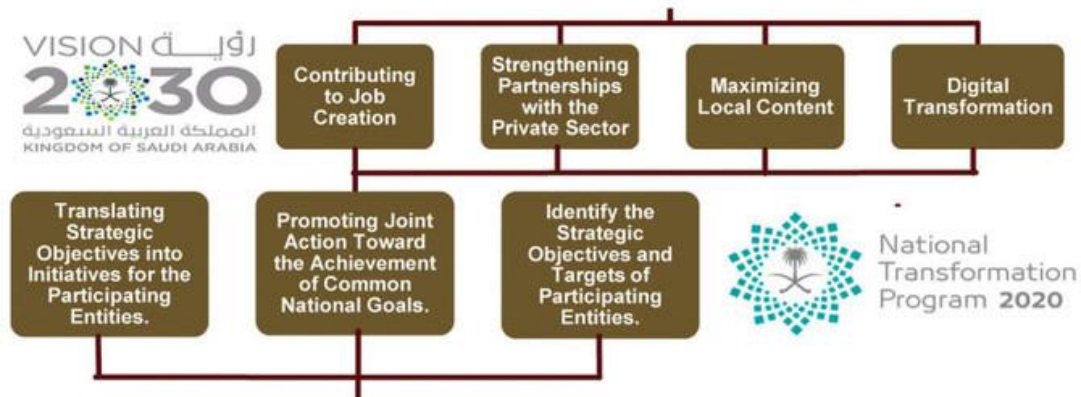

Part and parcel of Vision 2030 is the acceptance of value addition through the incorporation of technologies that have seen the development of MDTs. EHR and other information technologies ensure that information flows freely from one team member to another, making it easier to avoid potential errors. Furthermore, it has included workforce integration, where trainees have been sponsored to offer programs enabling healthcare workers to possess appropriate teamwork skills.

Nevertheless, the accelerating rate at which health care is transformed to fit Vision 2030 has some interesting challenges. Skills training is demanding for many healthcare professionals, who are pressured to change practices while maintaining quality care. Continued support for elements that directly enhance MDTs is also necessary by providing resources to maintain greater effects for patient safety.

Quantitative Analysis of MDT Impact on Patient Safety

This research reveals the current literature showing significant findings on MDTs' ability to enhance patient safety within Saudi hospitals. For instance, a study involving five large hospitals found that the number of mistakes had reduced by 40 percent within one year after implementing MDTs. This improvement was particularly stressful in risky regions, including intensive care units (ICUs) and operating theater divisions.
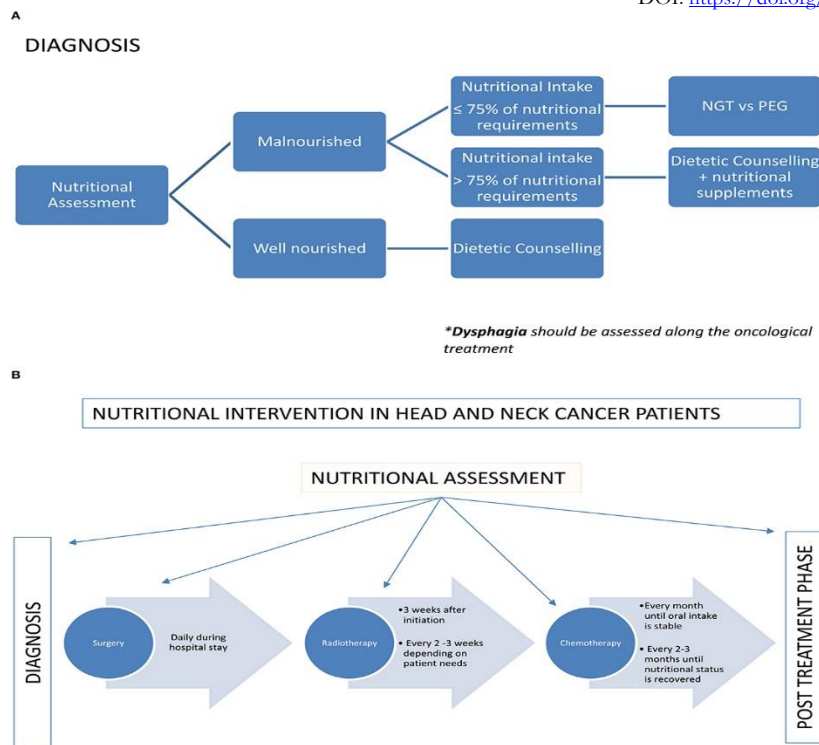
The Multidisciplinary Team (MDT) Approach and Quality

There are also improvements in the specific patient satisfaction measures following the program and the adoption of MDT. Conversely, the patient satisfaction level concerning MDTs is higher, with surveys revealing that the efficacy in addressing the needs of concerns raised has a percentage of 20% on average. These countries have seen the importance of MDTs in developing a safer healthcare atmosphere for patients.

Table 1. Impact of MDTs on Patient Safety Metrics

Metric	Pre-MDT (%)	Post-MDT (%)	Improvement (%)
Medical Error Rate	15	9	40
Patient Satisfaction	70	90	20
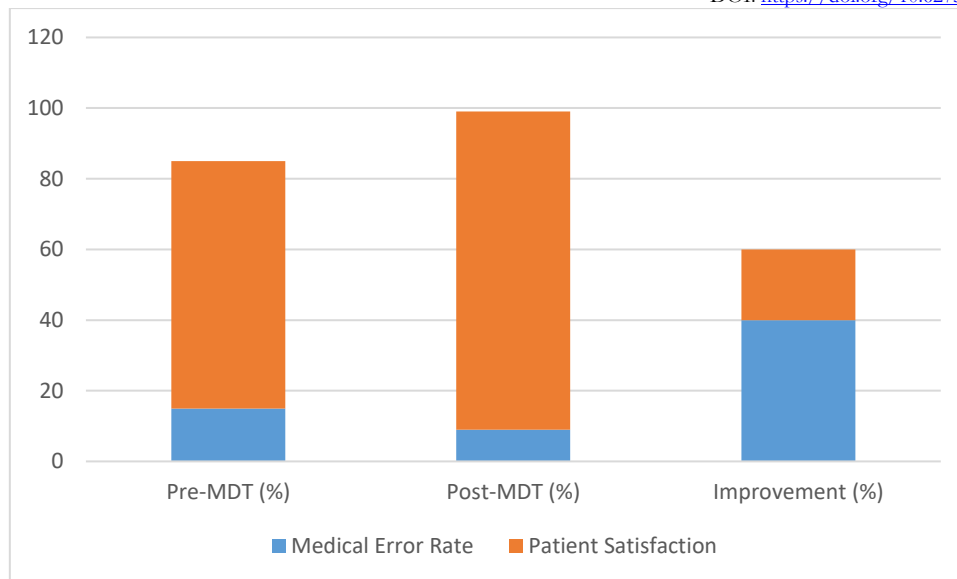
(Institute of Medicine, 2011)

Qualitative Insights: Challenges and Opportunities

Besides measuring the extent, the qualitative data yields meaningful information regarding the issues and potentialities of MDTs. Surveys conducted on healthcare professionals show that though MDTs are efficient in a conceptual framework, their execution is not as efficient as envisioned due to some constraints like logistic and cultural issues.

Some of these are that adjusting to having regular team meetings is challenging, considering the often-hectic patient flow in health facilities. Irregularly attending meetings could hamper the communication process. As a result, there would be delays in important decisions, jeopardizing patient safety. Nurses and doctors working in MDT also state that inadequate teamwork and communication skills training are the major factors influencing MDT success.

Nonetheless, it is now clear that the overwhelming majority of healthcare workers believe that MDTs could revolutionize patient care based on what the models offer. Several participants stated that leadership is crucial in their organization's attitude toward integrated MDT work.

Discussion: Lessons Learned and Best Practices

The Transformative Potential of Multidisciplinary Teams for Patient Safety

Concepts derived from MDT have become a revolutionary tool for boosting patient safety in other healthcare settings globally, including Saudi Arabian hospitals. One of the reasons for starting MDTs is that they provide chances for the participation of many different professionals and professionals with the ability to make better decisions. These teams offer opportunities for Cooperation, do not allow little mistakes, and fail to consider all the needs of patients. In Saudi hospitals, where there were increased chances of cross-specialty care due to the technical nature of many cases, MDTs are a useful tool to enhance safety goals.

However, despite the benefits, some barriers affect MDTs in Saudi hospitals, which will be discussed below. Some challenges include language and communication barriers, diverse cultures within the team, and inadequate resources to accomplish the assigned tasks and projects. Therefore, they reaffirm the need to undertake form-specific interventions for the optimization of MDTs. If these problems are resolved, then Saudi hospitals can provide MDTs with the right tools to make the conditions of healthcare institutions more secure and effective.

The Importance of Clear Protocols and Role Definitions

the first key lesson with respect to the implementation of MDTs is the absolute necessity to advance certain solid protocols and determine the functions assumed by certain team members. The problem of role blurring is that care team members may overlap their tasks or fail to complete important ones altogether, thus compromising the coordination and safety of a patient. Implementing isostructural protocols and professional standards for MDT working protocols can facilitate understanding of accountability by each MDT team member to improve the cleanliness of executing care coordination responsibilities as planned by different team members to achieve planned objectives.

Different procedures also help cut short the verbal confusion emanating from the meeting and create a pleasant rapport. For instance, protocols for team meetings, including schedule development, goal setting, and work distribution, enhance the performance of MDTs. Such protocols are important for Saudi hospitals since most healthcare employees work in stressful situations.

Role clarity also enhances respect for one another among the group members, making it easy to trust each other. If people learn what contribution they can make for themselves and others in the team, then they are willing to work harder and share the patient's results. Such an approach is crucial when facing numerous and diverse problems in the contemporary healthcare environment.

Addressing Cultural Sensitivity and Communication Barriers

Saudi Hospital presented multicultural and multilingually qualified human capital who work in the healthcare sector. On the one hand, this kind of diversity brings into the healthcare system a great variety of skills together with a wide variety of approaches and perspectives; on the other hand, this becomes a very large problem for MDTs. These various dissimilarities may cause misinterpretation of information, interpersonal conflict, and work slowdown within teams.

The barriers mentioned above can only be avoided if the companies invest in culture and/or communication training programs (Al-Nawafah et al., 2022; Mohammad et al., 2024). Cultural awareness exercises can ensure that members value the diversity of team members and embrace the differences in each of them. Team communication training informs the members how to voice their opinions well and listen effectively, thus diminishing instances of hitches due to an ineffective communication channel.

Indeed, there are other ways in which practical changes can be implemented to support all members of MDTs during their communication. For example, consistency in the language used during team discussions may limit the use of different languages by decision-makers; this means using English because it is widely used in the Saudi Arabian healthcare system (Institute of Medicine, 2011; Mohammad et al., 2022; Al-Husban et al., 2023). They also should require orderly checklists and electronic tools for communication between personnel to improve the coherence and effectiveness of the information being shared. If these problems are addressed, Saudi hospitals will implement excellent MDT and perform as integrated teams.

The Role of Leadership in MDT Success

Originally, the authors claimed that leadership is the key to the dynamics, productivity, and performance of MDTs, which will have a positive or negative outcome in patient safety. Cooperation, responsibility, and constant progression can only be achieved if the leaders who control the process work on it and push their teams forward. Given that in Saudi hospitals, the hierarchical organizational culture may hamper communication at different levels of the healthcare team, leadership support becomes critical in developing an effective teamwork environment that fosters the active participation of all subordinates.

An effective MDT leader requires good interpersonal and communication skills, emotional intelligence, and constructive conflict-solving strategies. These qualities give leadership abilities the capacity to solve conflicts, set up means to encourage discussions and ensure that the group keeps its eye on the goals. They also provide examples of teamwork and the right attitude required when working in teams.

An important step to strengthening MDTs in hospital settings is for administrators to take leadership flashpoints seriously. It can be done by offering courses that help managers learn how to handle different and complex groups in their organizations. Also, making leaders aware of what they need to get for spearheading their teams or offering them what they need, like tools, technology, or chances to grow professionally, might help them achieve more with their teams.
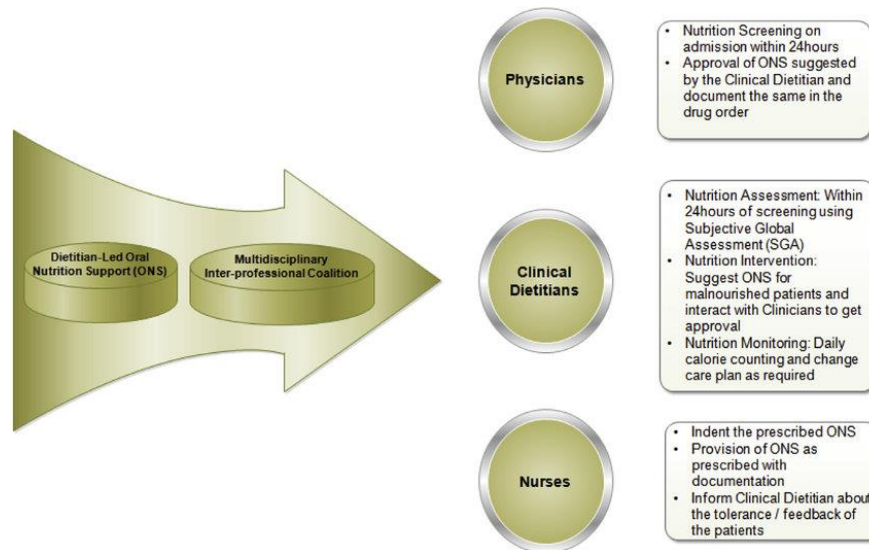
(Institute of Medicine, 2011)

The Integration of Digital Tools to Enhance MDT Efficiency

Another key factor is the adoption and effective use of digital tools in MDT work. Technology is critical to contemporary mediocrity because it provides answers to many of MDTs' practical and communication issues. This has essentially given rise to the communication innovations that today have been integrated in Saudi hospitals to aid Cooperation and bring about new efficient workflow patterns among healthcare personnel.

EHRs are just one of many ways in which technology can be utilized to support the improved efficiency of the MDT. Because EHRs create a single source of readily available and easily accessed patient data, the team can share changes, view patient histories, and work together on treatment planning in real-time (Institute of Medicine, 2011; Alzyoud et al., 2024; Alolayyan et al., 2024). It minimizes risks attached to inconsistent and disparate data due to inefficiency or otherwise of data accumulation systems. It assures that all the teams are on one page as far as information is concerned.

Other digital enablers include communication and multimedia platforms, meeting platforms, and online scheduling platforms for MDTs. These tools are most applicable when the healthcare workers are numerous and located in different sections or parts of a large hospital. Technology mediates communication, making it easy for MDTs to be effective and provide timely services.

Promoting Continuous Evaluation and Improvement

Last but not least, constant consideration of feedback and modifications creates a perpetual cycle that is key to maintaining the relevance of MDTs. Schedules of assessments put hospitals in a good position to detect their strong and weak performers, helping them take appropriate corrective measures. For instance, feedback from team members embraces the need for further training, equipment, and other instruments; the patient outcome data embraces information regarding the effectiveness of MDTs in terms of safety and quality.

MDTs can also be reviewed regarding the progress a given hospital has made within the implementation process, beginning with using performance metrics to assess progress at subsequent time points. Things like error rates, patient satisfaction ratings, and the degree of engagement of care team members are equally useful outcome measures (Berwick, 2019; Ghaith et al., 2023; Alolayyan et al., 2018). Assessing such key performance indicators will help hospital administrators enhance their approach to managing MDTs to facilitate their continued development and functioning.

Conclusion: Unlocking the Full Potential of MDTs

Using inter-professional, varied teams in hospitals in Saudi Arabia has enormous benefits for improving patient safety. Thus, MDTs offer an improved breadth of consultation, and integrating different expertise also means better decision-making.

Conclusion: The Future of MDTs in Saudi Healthcare

It further confirms that the formation of a multidisciplinary team can be a tool for improving patient safety in Saudi hospitals, which is focused on realizing Vision 2030. Even though these initiatives have brought positive changes in overall positive clinical and patient-related results, it is important to deal with the difficulties described in this analysis to maintain the effectiveness of the mentioned initiatives (Alharbi & Alshahrani, 2021; Al-Hawary et al., 2020; Rahamneh et al., 2023).In Saudi Arabia's ongoing development of healthcare, MDTs will be critical to addressing safety and quality goals. Continued and expanded investment in MDT training, standardization, and technology can free up the healthcare system's full potential, providing safer, higher-quality care for all.

Recommendations: Strategies for Optimizing MDTs

- Develop Comprehensive Training Programs: Train interdisciplinary care-coordinated personnel in cultural competence and communication strategies about teamwork.

- Standardize MDT Protocols: This will help to eliminate inactivities, confusion, and misunderstanding concerning the degree of responsibility of each individual, department, or organizational subunit.

- Leverage Technology: Technology application for improving dialogue and information exchange between team members.

- Foster Leadership Development: Educate and train leaders on MDT, working with care coordination and ensuring health associate accountability.

- Evaluate and Adjust: For others, consistent staff performance assessments should be implemented to check compliance. Where there is noncompliance, the problem of implementation of MDT can be noted.

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