Faculty of Health: Medicine, Dentistry and Human Sciences

School of Psychology

2015-09-09

Clients bringing professionals together: Affiliation and alignment in psychology involved healthcare MDT meetings

Smart, Cordet

http://hdl.handle.net/10026.1/4489

All content in PEARL is protected by copyright law. Author manuscripts are made available in accordance with publisher policies. Please cite only the published version using the details provided on the item record or document. In the absence of an open licence (e.g. Creative Commons), permissions for further reuse of content should be sought from the publisher or author.

Social Psychology Section

Title: Clients bringing professionals together: Affiliation and alignment in psychology involved healthcare MDT meetings

Background: Multi-disciplinary team (MDT) working is increasingly advocated in healthcare. Services with psychology input where decisions about professional interventions are unclear particularly rely on MDT meetings to develop appropriate care strategies requiring some form of collaborative outcome. Research on these MDTs has mostly been retrospective, with a paucity of naturalistic observation of meetings examining team agreement and limited application of psychological theories. Some studies have begun to identify laughter in such MDT meetings as relevant for collaboration. Other patterns of 'agreement' might also be interesting. This research draws on the Conversation Analysis concepts of alignment and affiliation to explore patterns of 'agreement' in team meetings.

Methods: 20 hours of psychology involved MDT meetings talk have so far been collected. Analysis using Discursive Psychology/Conversation Analysis is focusing on the production of agreements through alignment and affiliation, as most meetings require some form of solution or outcome at the end of the session.

Findings: Preliminary analysis suggests the sequence organisation of alignment and affiliation differs according to conversation topic; affecting orientations toward the (not present) client in addition to the task, team member identities and relationships. Talk focused on time spent with the client, in particular, provided opportunities for affiliation and collaborative completion.

Discussion: Earlier distinctions between task and person focused behaviour, and subject orientated talk and progressivity in decision making might be revised in the case of MDTs. Our results indicate that construction of client subjectivity is important for collaborative talk in MDTs. This might inform clinicians involved in these meetings.