Empowering Nurses Participating in a Multidisciplinary Cleft Lip and Palate Team Implementing Evidence-Based Practice Solutions

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APROQUEN MULTIDISCIPLINARY CLEFT LIP AND PALATE TEAM, MANAGUA, NICARAGUA

Purpose
Highlight nurses’ capacity to impact patient outcomes as a multidisciplinary team member through a case study example of cleft lip and palate nurses in Nicaragua.

Project Objectives
• Describe the role of nurses on multidisciplinary teams
• Identify ways in which nurses can establish and grow their role multidisciplinary teams in developing countries

Background
• World Health Organization estimates that cleft lip with or without palate involvement affects almost 1 in every 600 newborns worldwide. (Rates in Nicaragua are estimated to be much higher, no statistical data available from Nicaraguan Ministry of Health).
• Aproquen, a non-profit Nicaraguan foundation, employs a multidisciplinary team model to address the complex needs of cleft lip and palate children and their families in this developing country

Multidisciplinary Team
Comprised of members from different healthcare professions with unique focused expertise.
• Address both physical and psychosocial health
• Ensure comprehensive, stream-line approach to patient care using best practice

Aproquen Nurse’s Clinical Role
• Educator: Feeding techniques, personal hygiene, and post-operative care
• Patient/Family Advocate - Address families’ psychosocial needs at the intersection of customs, beliefs, values and inherited attitudes
• Clinician: Monitor for pre/post-operative complications
• Care coordinator: Transcend the surgical and emotional process from initial consult to follow-up, including transportation and housing while child receives care

Aproquen’s Practices to Empower Nurses in a Developing County
• Initiate multidisciplinary team meetings
• Standardize patient education through creation of written documents (Image 1 and 2)
• Creation of infection control nurse to track infection rates and update protocols/procedures based on evidence

Challenges with Multidisciplinary Team Roles in Developing Countries
• Nursing roles are task oriented
• Cultural norms prohibit open discussion and new ideas
• Fragmentation of health care roles does not encourage communication among team members
• Large number of patients and few healthcare providers creates schedule and time constraints for team meetings

Image 1
Image 2

Johns Hopkins School of Nursing