

Lets Talk Teams ! (no really!)

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Objectives

- Integrated Care and teams
- Organizational team structure
- Team “best practices”
- Whose on a team
- Who leads a team
- Documentation of team activities



Team-Based Care in Healthcare Settings

Team-based health care: when at least two health professionals who work collaboratively with patients and their caregivers promote health services to individuals, families and/or their communities to achieve coordinated, high quality care and shared goals within and across settings (Healio).

- Team-based care is becoming increasingly important as the health care delivery system moves from fee-for-service payments to value-based payment models and care itself becomes more complex.
- Team-based care is also a way to address the needs of an expanding patient population in the US with a simultaneous shortage of primary care physicians.
- The current infrastructure for primary care in the US is not sufficient to meet the population management needs of a primary care patient pane.
- The use of a well-organized and optimized care team addresses many of the issues faced in healthcare today

Value of Team-Based Care in Healthcare Settings

- **Advantages for patients:**

- enhanced access to care and services with a consistent care team;
- improved quality, safety, and reliability of care;
- enhanced health and functioning in those who have a chronic condition;
- more cost-effective care.
- Patient and family experience also tends to improve with a high-functioning primary care team.

- **Advantages for medical professionals:**

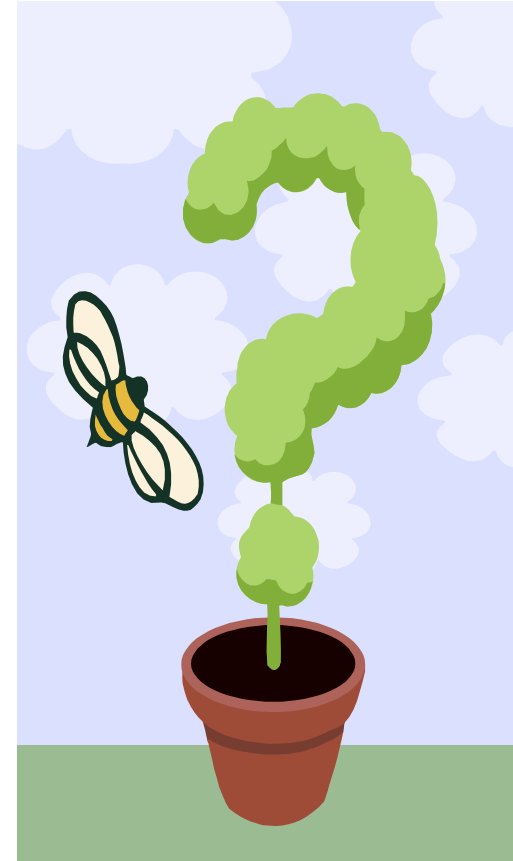
- Frees time for physician to focus on communicating with patients, collaboratively setting goals, or using their expertise for more serious conditions.
- Greater physician and staff satisfaction

BENEFIT OF TEAM-BASED CARE FOR PHYSICIANS

- If we look nationally, approximately 50 percent of primary care physicians in the country are experiencing burnout.
- Research shows that creating job role assignments, promoting shared decision making, maximizing patient time with physicians, optimizing electronic medical records, and shifting clerical burdens to non-physician staff increases physician satisfaction
- Team- based care allows you to establish each of these, removing some of the burdens that physicians face

Integrated Care Helped Form Team Care (but is not team care !)

- Integrated Care
- Interdisciplinary Care
- Collaborative Care
- Multidisciplinary Care
- Transdisciplinary Care
- Co-located Care



Transdisciplinary Team Care

- The advanced model of team care developed from collaboration and integration work
- Considered a “Gold Standard”

What it takes to move towards transdisciplinary team care.....



Transdisciplinary Care

- Cross education and training
- Shared Care Planning
- Shared Accountability



Cross Education and Training

- Everyone knows something about what others on the team do
- Behavioral health, chronic illness
- Hedis and quality measures
- Opportunities where we train – what do all disciplines need to learn ?



Shared Care Planning

- Located in the chart where it is visible to all
- What is on “fire”
- What does it mean to reinforce ?
- Taking the lead can transition
- Care planning vs. treatment planning
- Setting manageable, achievable goals helps promote share care planning as easier to “build” upon
- Start with a population



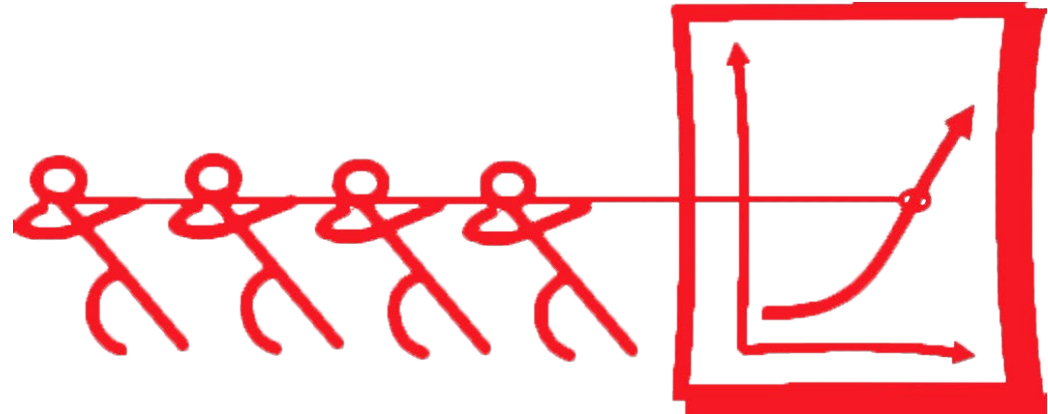
Shared Accountability

- Promotes team care !
- Needs to be “baked “ in to organizational processes like evaluations
- Often EMR modification so all can see alerts or preventative care
- Not just licensed providers , everyone on care team
- All individuals or entire team can be held accountable



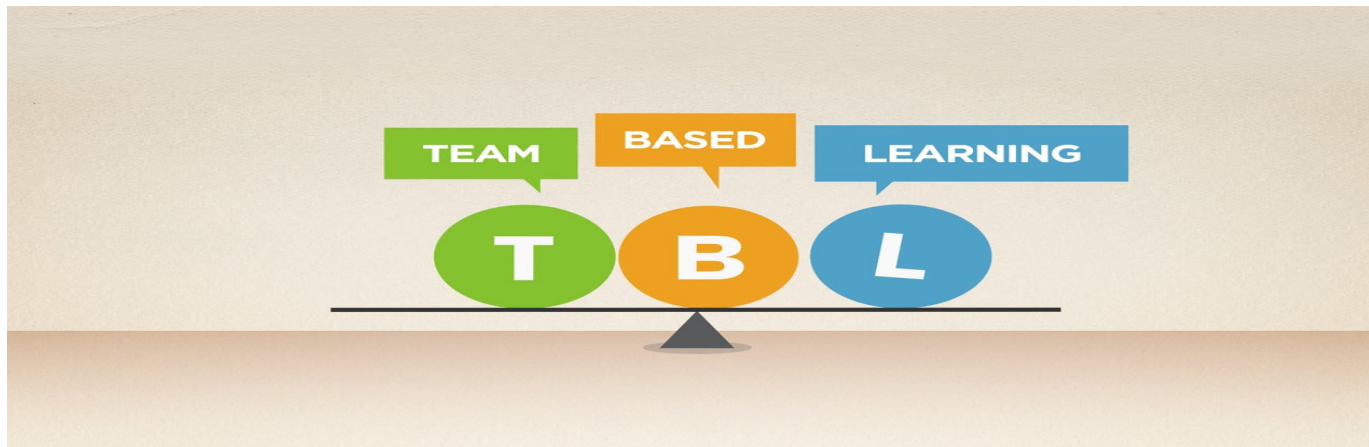
Teams Are Not Clinic Based.....

- They are organizational based
- Hiring process –training, orientation, interviewing
- Committees- all disciplines represented
- Intake processes
- Board
- What are other opportunities ?
- Do you manage as a team ?



Team Based Management

- Lesson I learned with my CMO.....
- Thinking about the principles of team based care on organizational and management practices
- Where can you do this in your centers locally or organizationally?





A good huddle can be done in as little as 10 minutes. It does require everyone to show up on time, which means, if your first appointment is at 8:30 am everyone on the patient care team must show up at 8:15 am to begin the huddle. Most teams build their huddle time into their work schedules.

What is needed for a successful huddle?

1. All team members present (typical teams include the provider, MA, and Nurse) added benefit to have other members: team receptionist, pharmacist, nutrition, covering PA/NP, behavioral health
2. Everyone is on time!
3. A place for the team to meet with a couple of computers available for the team to use
4. Intense and purposeful focus. No interruptions! Do not be distracted by phone calls, emails, or other staff.
5. Proximity! A team shouldn't spread out in a room sitting in chairs to huddle. Imagine how sports teams huddle. They get up close, heads together, and speak to each other with focus and energy. Try to mimic this kind of huddle.

Team Huddle Guidelines:

1. Occur twice a day- before each session
2. Be kept to less than 10 minutes
3. Become a daily clinic practice routine

The Goal of Huddles is for everyone to feel calm: It is so much calmer planning for these bumps before they happen rather than dealing with them in the midst of seeing patients, isn't it?

What do you talk about? You discuss the patients that are coming in that day for their appointment and people you may need to worry about:

1. Patients with chronic disease: administering PHQ-9's for depression, Asthma questionnaire/Peak Flow, or removal of shoes and socks for Diabetics
2. Patients who are often late, problematic or have high service needs
3. Canceled appointments
4. Patients who need follow-up from the hospital or ED
5. Team communicates about future/standing immunization, lab, and radiology orders and Provider places those future/standing orders not covered under CHA Standing Order Policies
6. Confirm which patients may need an interpreter for their visit
7. Population Health: those who will need FOBT cards, mammography, pap smear, PSA

What determines "an effective" huddle:

1. Everyone contributes
2. Team anticipates as much as it can
3. Strategies are developed to handle potential problems or scenarios

More strategies for effective huddle and high performing team:

1. Do a quick check in with everyone
 - A. How is everyone feeling today?
 - B. Is anyone leaving early?
 - C. Is anyone out today?
 - D. How can we support each other through the session?
2. Know the status of each team member because everyone is critical to the success of the team.

Team Documentation

- What kind of team notes should be documented and where ?
- When do you document in patients chart?
- How do you track and why ?

Questions

