Team-Based Care

Lessons Learned

Using a team-based approach improves the quality of care and work life of clinical providers and staff.

Performance Challenge

Traditional medical practice is structured for each patient to be seen by a single clinician who takes care of all health needs and tasks during their visit, which creates bottleneck and frustration when only one patient can be cared for at a time, and results in delayed care for patients and burnout for providers and staff.

- Care is dependent on the clinician, and only one patient can be seen at a time.
- Staff often wait on the clinician for decisions to get their work done.
- Patients wait until after clinic hours to hear back from their provider, delaying care.
- Clinicians spend hours working after clinic.

Practice Solution

Employ a team-based care approach which distributes work across individuals that is appropriate to their role and allows for more responsive and timely care.

Team-based care is a sustainable solution to both improving the quality of care and work life of providers and staff.

Practice Spotlight

Union Square Family Health Center, a Family Medicine site of the Cambridge Health Alliance located north of Boston, MA had a problem: after years of devoted service to a diverse community, doctors were burning out and leaving. Despite many changes and improvements to care, including use of registries, changing the role of the nurses to manage chronic diseases, and becoming a recognized Patient-Centered Medical Home (PCMH), the doctors were getting tired. Many of these additions were, in fact, more work for doctors, and charting often took hours after a busy day of seeing patients in the office.

A team-based care model was implemented as a sustainable solution to overwork. The practice redesigned their workflows with doctors and nurses to incorporate a team-based care approach where Medical Assistants and Receptionists “stepped-up” their level of interaction with patients, freeing doctors to diagnose and treat diseases.

Once it was clear that more help was needed, physician assistants were hired to share panels, allowing doctors peace of mind when out of the office. Pharmacotherapists joined the practice to help educate patients about chronic diseases and optimize treatment regimens. Integrated Behavioral Health teams of therapists, community health workers, and psychiatrists were now available to help with patients suffering from anxiety, chronic depression, post-traumatic stress disorder, and even smoking cessation. Taking care of patients from cradle to grave is a lot of work, and teams allow for specialized and individualized care for each patient.

The staff of the practice gathers to share stories about how each person made an individual’s life better, happier, and healthier. Sharing stories of success led to celebrations of work and of each staff member. Each staff member has a “life list” of people whose lives they helped through practice, such as reminding a patient to get their colon screening, PAP smear, mammogram. For example, when a patient’s cancer is avoided or caught early, the practice’s staff celebrates the staff member’s work and adds this person to their “life list.”

Staff and providers realized the power of working in teams as quality metrics started to improve, resulting in a new sense of pride and joy among staff. Burnout and turnover decreased dramatically, and the practice now has engagement scores for the site at 86% for staff and 98% for providers (compared to national data). The practice also hosts annual retreats and events outside of work at least four times a year.

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Lessons Learned

Change Tactics

Successful practice transformation tactics fall under Person and Family Centered Care and Sustainable Business Operations:

- **Team-Based Relationships**—offer complementary styles of practice to meet patient needs from different types of providers.
- **Patient and Family Engagement**—integrate patients as team members to share their expertise and strengthen the bond between clinician and patient.
- **Staff Vitality and Joy in Work**—engage staff, providers, and patients in having their voice heard and priorities incorporated in practice workflows and culture.

Resources

- **AMA Steps Forward™ Interactive Cost Calculator** to estimate the cost and benefit of implementing team-based care in your practice. Enter the amount of time per day spent by physicians on activities that could be eliminated by implementing team-based care and the estimated cost of the specialist. The result will be daily physician time saved and annual savings of implementing team-based care.
- **ACP Practice Advisor**© has short, interactive assessment and learning modules to assist with implementation of new workflows. Many modules are CME/MOC-eligible. *(Registration Required)*
- **NNCC’s Team Based Care Training** is a four-hour workshop using the train-the-trainer model. This workshop session will provide attendees with skills to build interdisciplinary care teams and optimize their use for patient-centered care. Attendees learn how to define care team roles and responsibilities to optimize efficiency, outcomes, and accountability.

Practice Spotlight

Figure 1: Effect of High-Functioning, Integrated Behavioral Health Teams on Tracked Measures

People who enter our practice comment on how calm and happy everyone is. Patients frequently refer to staff as their “family.”

A joyful work environment elevates the energy level of everyone in it, and Union Square demonstrated their capacity for change and improvement work. Activated staff and patients bring suggestions to improve care and in how the clinic functions to leadership every day, knowing that their suggestions are welcomed and encouraged.

Figure 2: Changes in Symptoms of Burnout as a Result of High-Functioning Teams

Structural changes are essential to maintaining the improvement culture; weekly staff meetings and weekly team meetings are held in an “all teach all learn” format. The time spent in meetings is easily recovered with increased efficiency and lack of burnout. The consensus if that no one who has made the transition to this new environment would “go back.”