Formation of Specialty Care Teams and Impact on Patient Care Outcomes

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Development of specialty care practice teams were identified as a need within the Pediatric Intensive Care Unit as there are a multitude of specialties that interface with each other in order to comprehensive care provided to patients. These teams consisted of interdisciplinary members beyond nursing such as surgeons, unit based physicians, respiratory care, case management, or other ancillary services directly related to influence care for that patient population. The nature of the team composition proved to be a challenging feat in focusing priorities. However, the discovery of concerted efforts proved to be the most beneficial tool in impacting care delivered to patients.

The new teams required that assigned staff become leaders of the team, a plan was created through collaborative agreement in priorities for patients and team. Abides by existing overarching structural requirements related to team leading, seeks and provides feedback and mentoring in lead role. The members who join are also subject to similar requirements. Also leads and members should be sought out prior to placement on team, by seeking volunteers as well as management approval. Engagement of team members is by far the most important aspect of the composition. Rather than focus on one patient at a time the team’s purpose was looking at improvement of specific patient population education, staff education, processes and organizational supports needed in order to continue change. Specific examples such as head of bed signage, OR to unit hand-off standardization, in-service education following transparent delivery of quality and patient safety data. Overall the implementation of Specialty Care Teams proved to be a successful adjunct as an impactful source of patient care delivery. However, there is still more work to be done. The institution of a Specialty Care Team with focus on specific patient care outcomes that are measurable, achievable and most meaningful to patient satisfaction and outcome is a valuable addition for any organization.

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References:

Botts, S. R., Gee, M. T., Chang, C. C., Young, I., Saito, L., & Lyman Jr., A. E. (2017). Design and implementation of population-based specialty care programs. American Journal of Health-
Abstract Summary:

At Stanford Children’s Specialty Care Teams were pioneered within the PICU. Prior to team formation review of the data showed incidence of tracheostomy decannulations and pressure ulcers. During this time concerted efforts were made to distinguish the team’s contribution versus an educational intervention to interdisciplinary staff on impacting outcomes.

Content Outline:

OBJECTIVES:

- To recognize how implementation of specialty care teams can improve patient care outcomes and other care
- Understand the implications of ENT specialty care team at unit level as focused means of improving staff development as well as collaboration.
- Identify areas within organization where a Specialty Care Team can benefit professional practice.
- Discuss methods for team composition and creation.
- Outline individualized organizational goals in order to create a specialty care team program within your organization.

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Author Summary: Being a nurse has many rewards. The first and foremost is advocating for your patient, their families and loved ones. However, as the healthcare economy continues to grow and challenge nurses, focus and strength should be centered around providing resources to support nurses in this manner. Over the last 10 years I have held a first hand account of the struggle and wish to provide my support in nurses as they care for patients.