Effective decision making is best achieved when those who have a stake in the decision have an opportunity to have input during the decision making process. As part of the implementation of TeamStepps®, and in alignment with the organizational professional practice model - Collaborative Care, North Shore University Hospital (NSUH) initiated Collaborative Care Councils (CCCs) in 2007. These Councils, which are unit based and feed into a Central Council, are designed to enhance interdisciplinary communication, foster healthy work environments, and support decision making by those closest to the work being addressed. Typical representation at Council meetings may include nurses, advanced practice providers, patient care associates, social workers, case managers, physical and respiratory therapists, pharmacists, dieticians and physicians.

Through the forty six CCCs currently active at NSUH, all levels of staff have a forum where ideas can be brought forward regarding desired areas of improvement, solutions for problems identified and strategies developed to meet identified goals. In late 2011, patient satisfaction data was shared at a Central Council meeting and all Council Chairs were asked to prioritize patient satisfaction as an agenda item at unit Council meetings. Each unit Council reviewed unit specific patient satisfaction data and developed their own initiatives to improve specific areas of concern. As improvement was noted, information was shared at Central Council meetings and best practices were identified and implemented across the organization. NSUH's Press Ganey percentile ranking for “Overall Patient Satisfaction” increased 11 percentile points between December 2011 and August 2012. Similarly, our percentile ranking for “Likelihood to Recommend” improved by 16 percentile points over this time period. These and other improvements are widely attributed to the Collaborative Care Council infrastructure as the CCC’s were instrumental in developing, implementing and evaluating the patient satisfaction efforts.