



Knowledge that will change your world

Building High Performing Interprofessional Collaborative Practice Teams for Enhancing Population Health and Care Transitions

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Disclosure

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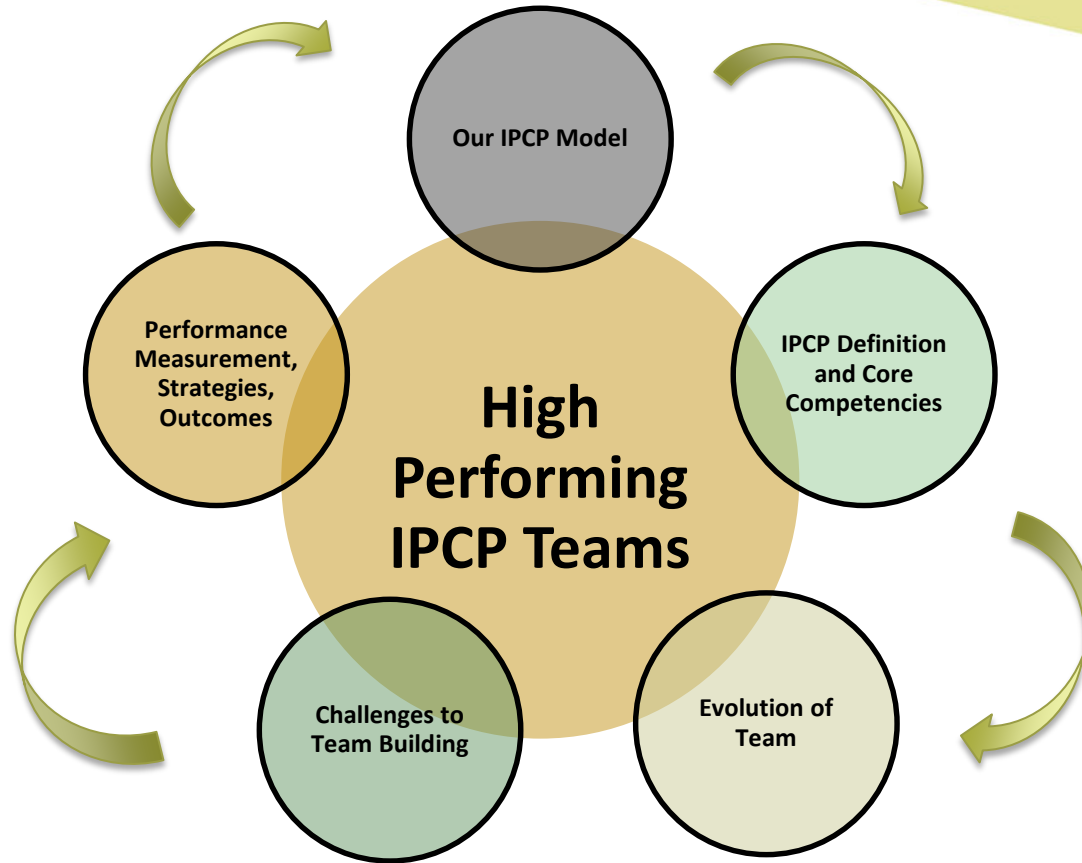
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Objectives

1. Discuss characteristics of high performing teams.
2. Discuss performance measurement approaches used to deploy targeted strategies for building high performing teams in an interprofessional collaborative practice model.



The HRTSA Clinic

(Heart Failure Transitional Care Services for Adults)



- Provides nurse-led, team-based care to uninsured patients with heart failure who are discharged from UAB Hospital with no source for ongoing care
- HRTSA Clinic is the 2nd nurse-led clinic at UAB, which uses and IPCP model; currently in 4th year of operation and 1st year of sustainable funding post grant funded period
- HRTSA Clinic now operates full-time in expanded space, 2nd floor of Russell Ambulatory Center at the UABH campus
- Is part of an Academic-Practice Partnership of the UAB School of Nursing and UAB Hospital
- Integrates professionals from 7 disciplines plus students from those disciplines

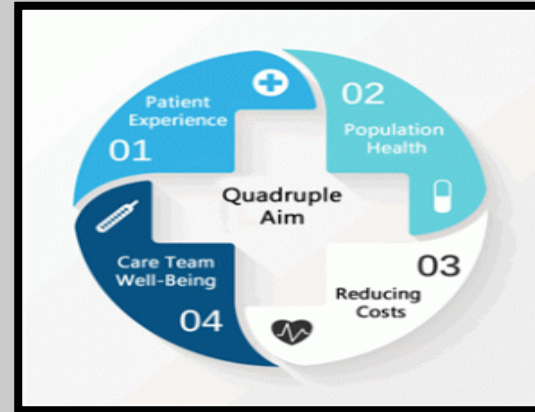
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Interventions: Bundled Approach

- Guideline driven heart failure patient care bundle
- Transitional care coordination bundle
- Patient activation bundle

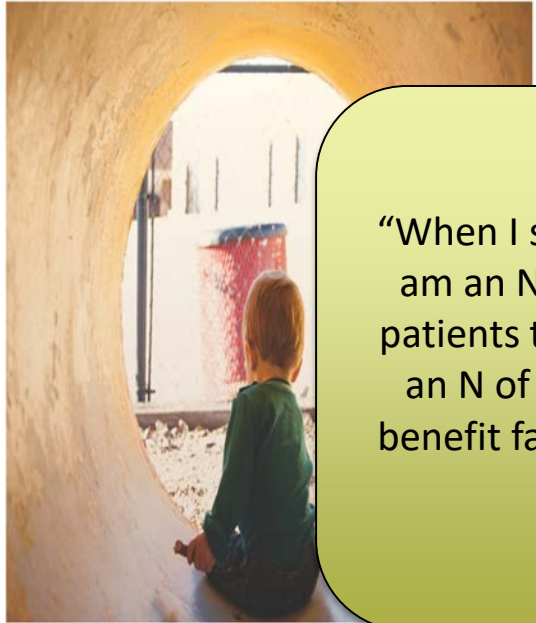
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Outcomes: From Triple to Quadruple Aim



IPCP Definition

- “Multiple health workers from different professional backgrounds working together with patients, families, and communities to deliver the highest quality of care” (World Health Organization, 2010, p. 13)
- Our model of IPCP incorporates IPE= two or more professions learning with, from, and about each other



“When I see a patient alone, I am an N of 1. When I send patients to the HF Clinic, I am an N of many and patients benefit far more than with an N of 1.”



IPCP Core Competencies

Competency 1: Values/Ethics for Interprofessional Practice

Competency 2: Roles/Responsibilities

Competency 3: Interprofessional Communication

Competency 4: Teams and Teamwork

(IPEC, 2011; IPEC, 2016)

Evolution of Team Dynamics

Adapted from Seminal Work of Tuckman (1965)

Honeymooning

Pre-team formation
optimism/
pessimism



Forming

Team acquaints and establishes ground rules. Formalities are preserved and members are treated as strangers.



Storming

Members start to communicate their feelings but still view themselves as individuals rather than part of the team. They resist control by group leaders and show hostility.



Norming

People feel part of the team and realize that they can achieve work if they accept other viewpoints.



Performing

The team works in an open and trusting atmosphere where flexibility is the key and hierarchy is of little importance.



Adjourning

The team conducts an assessment of the year and implements a plan for transitioning roles and recognizing members' contributions.



Mourning & Transforming

Phase of team work ends and new evolution begins including new members

Characteristics of High Performing IPCP Teams

Members:

- Demonstrate effective leadership with deference to expertise
- Are interdependent, work collaboratively, genuinely care about and trust each other
- Find solutions to problems using appropriate tactics and open communication
- Have shared mental models and establish unique group
- Achieve effective and satisfying results

Challenges to Team Building in IPCP Model

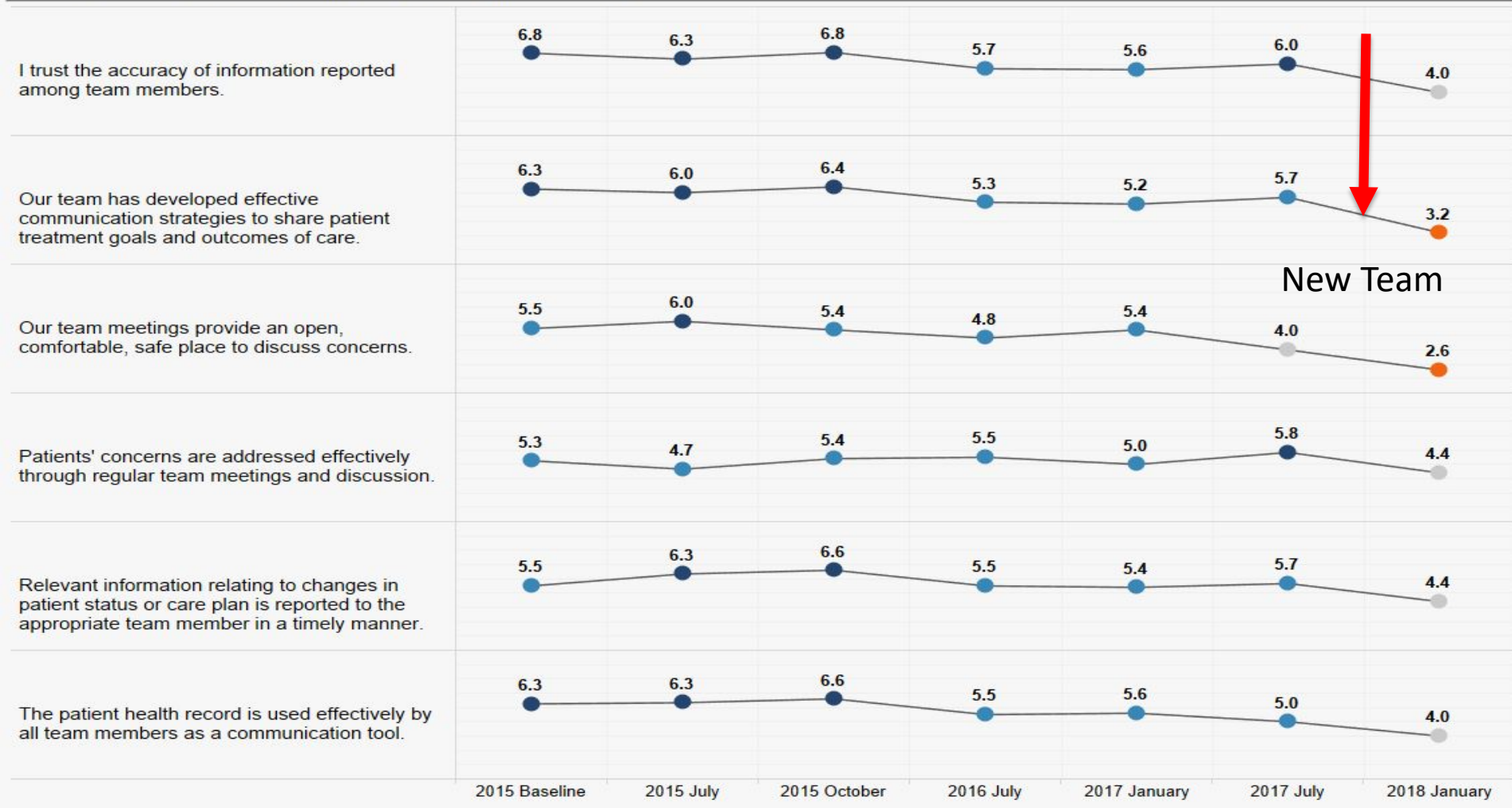
- Hiring the right people for IPCP matters
- Moving from the forming to performing stages of team development does not happen overnight; investing in building your teams pays off
- IPCP with high performing teams is not easy; if it were, everybody would be doing it
- Performance measurement helps to identify targeted strategies needed to build high performing teams that achieve desirable outcomes

Performance Measurement: Collaborative Practice Assessment Tool (CPAT)

- CPAT is valid and reliable instrument
- Measures 8 dimensions using 7-point Likert scale (Strongly Disagree=1 to Strongly Agree=7)
 - Mission, meaningful purpose, goals
 - General relationships
 - Team leadership
 - General role responsibilities, autonomy
 - **Communication and information exchange**
 - Community linkages and coordination of care
 - **Decision-making and conflict management**
 - **Patient involvement**

Collaborative Practice Assessment Tool -- Communication and Information Exchange

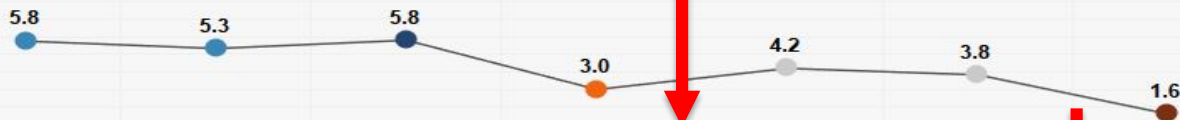
* Scale of 1 to 7 - Higher scores indicate higher alignment with IPCP.



Collaborative Practice Assessment Tool -- Decision-making and Conflict Management

* Scale of 1 to 7 - Higher scores indicate higher alignment with IPCP.

Disagreements among team members are ignored or avoided.



In our team, there are problems that regularly need to be solved by someone higher up.



On our team, the final decision in patient care rests with the physician.



Our team has an established process for conflict management.



Processes are in place to quickly identify and respond to a problem.



When team members disagree, all points of view are considered before deciding on a solution.



Roles and Responsibilities

Emotional Intelligence

DISC Assessment

Outside Facilitator

Roles and Responsibilities

2015 Baseline

2015 July

2015 October

2016 July

2017 January

2017 July

2018 January

Collaborative Practice Assessment Tool -- Patient Involvement

* Scale of 1 to 7 - Higher scores indicate higher alignment with IPCP.

Information relevant to health care planning is shared with the patient.



Team members encourage patients to be active participants in care decisions.



Team members meet face-to-face with patients cared for by the team.



The patient is considered a member of their health care team.



The patient's family and supports are included in care planning, at the patient's request.



Strategies for Building High Performance Teams

- Daily huddles and debriefs, monthly team meetings, quarterly retreats
- Just-in time intervention group meetings including role playing and conflict resolution
- Individual counseling with referral to resources
- Multiple team training sessions:
 - IPEC competencies
 - Team STEPPS, CUS, SBAR technique for communication
 - Rapid cycle quality improvement
 - Leadership Development (Signature Strengths, Emotional Intelligence, Crucial Conversations, DISC Assessment)

Conclusion

- The IPCP model reflects positive team performance outcomes related to professional collaboration and teamwork
- High performing teams working collaboratively can favorably impact Quadruple Aim outcomes
- Understanding nuances of team formation and developmental stages is crucial for better performance measurement and deployment of targeted team building strategies

Questions

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