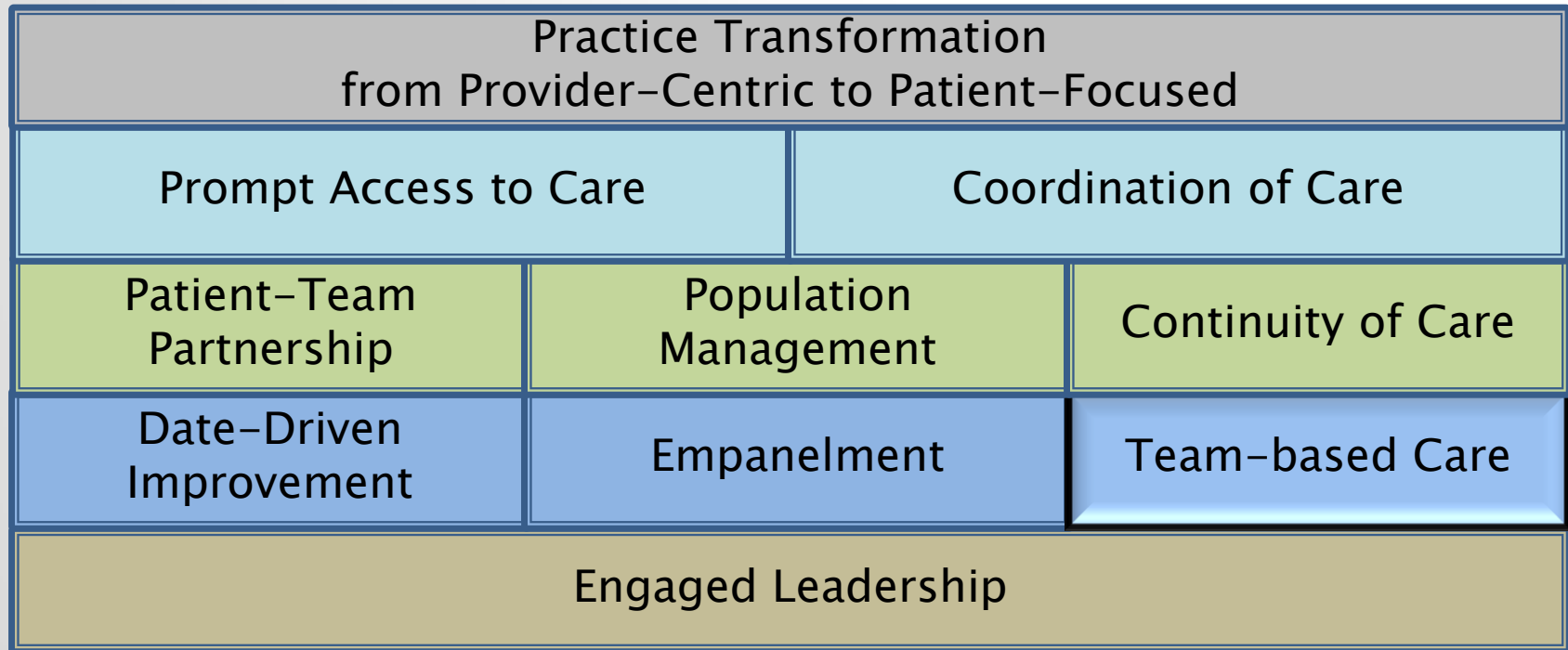# Creating a Capable Care Team

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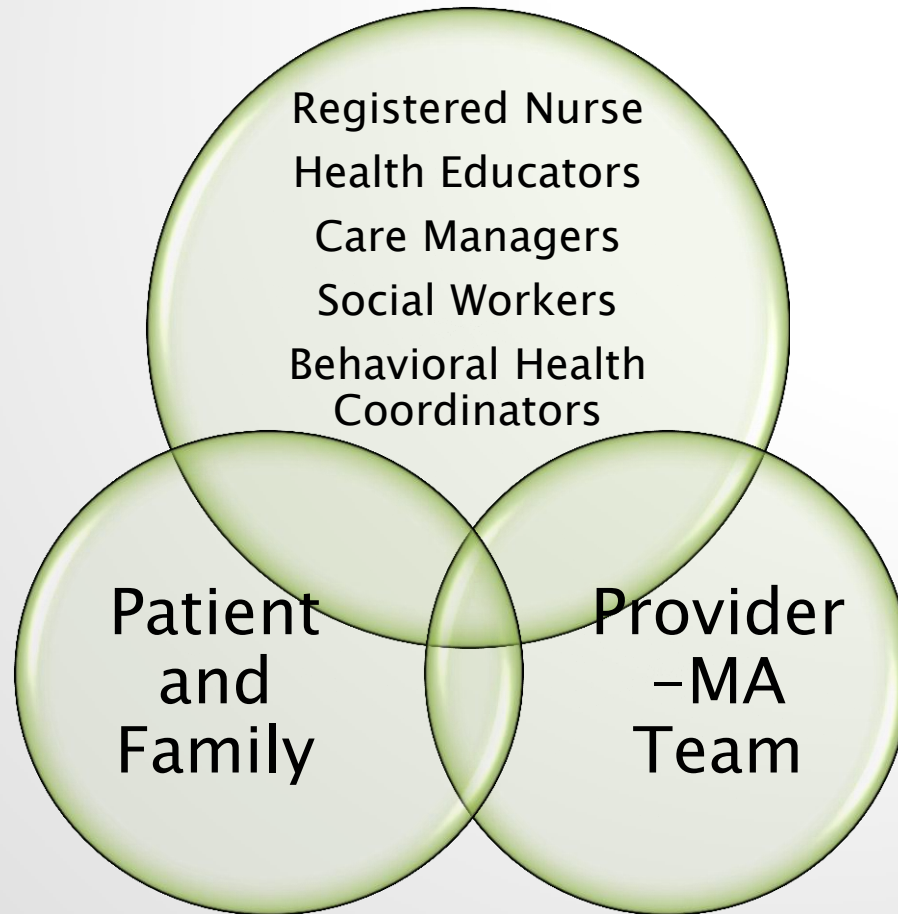
Objectives

- Describe the ideal composition of a well-functioning care team
- Identify the role of the care team in managing provider panels
- Identify opportunities in the individual practice setting to develop a capable care team using clinical decision support, standardized orders and other techniques

High Performing Medical Practices

Practice Transformation from Provider-Centric to Patient-Focused		
Prompt Access to Care		Coordination of Care
Patient-Team Partnership	Population Management	Continuity of Care
Date-Driven Improvement	Empanelment	Team-based Care
Engaged Leadership		

Adapted from Willard, R and Bodenheimer, T. (2012) The Building Blocks of High-Performing Primary Care: Lessons from the Field. Prepared for California Healthcare Foundation

Ideal Care Team

Registered Nurse
Health Educators
Care Managers
Social Workers
Behavioral Health Coordinators

Patient and Family

Provider –MA Team

Ideal Team Model

Patient Panel

Patient Panel

Patient Panel

Clinician /MA teamlet

Clinician /MA teamlet

Clinician /MA teamlet

Shared Support Team
(RN, LSW, pharmacist, health coach,
care manager, panel manager)

Empowered Front Desk in Expanded Role

Phone Operator or Call Center

Stacking the Deck for Success

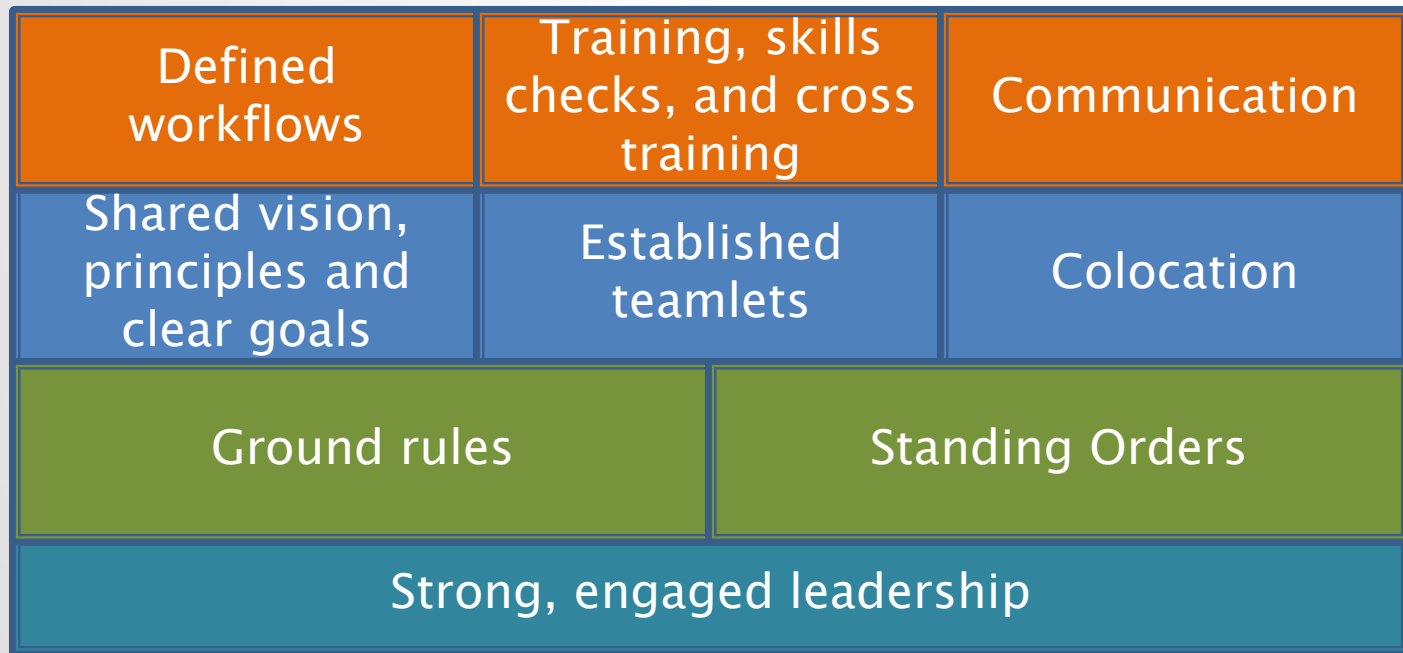|		
Defined workflows	Training, skills checks, and cross training	Communication
Shared vision, principles and clear goals	Established teamlets	Colocation
Ground rules		Standing Orders
Strong, engaged leadership		

Adapted from Willard, R and Bodenheimer, T. (2012) The Building Blocks of High-Performing Primary Care: Lessons from the Field. Prepared for California Healthcare Foundation

Key Success Factors

- Build a stable team
- Develop clear operating principles
- Define workflow
- Communication
- Standing Orders

Stable Team

- Consider allowing self-selection
- Make every effort to keep teams together allowing them to "gel" as a team
- Work with providers to change the mind-set from simple delegation to responsibility and accountability
- Offer MA's and providers the opportunity to talk about their greatest fears related to the new model

Principles
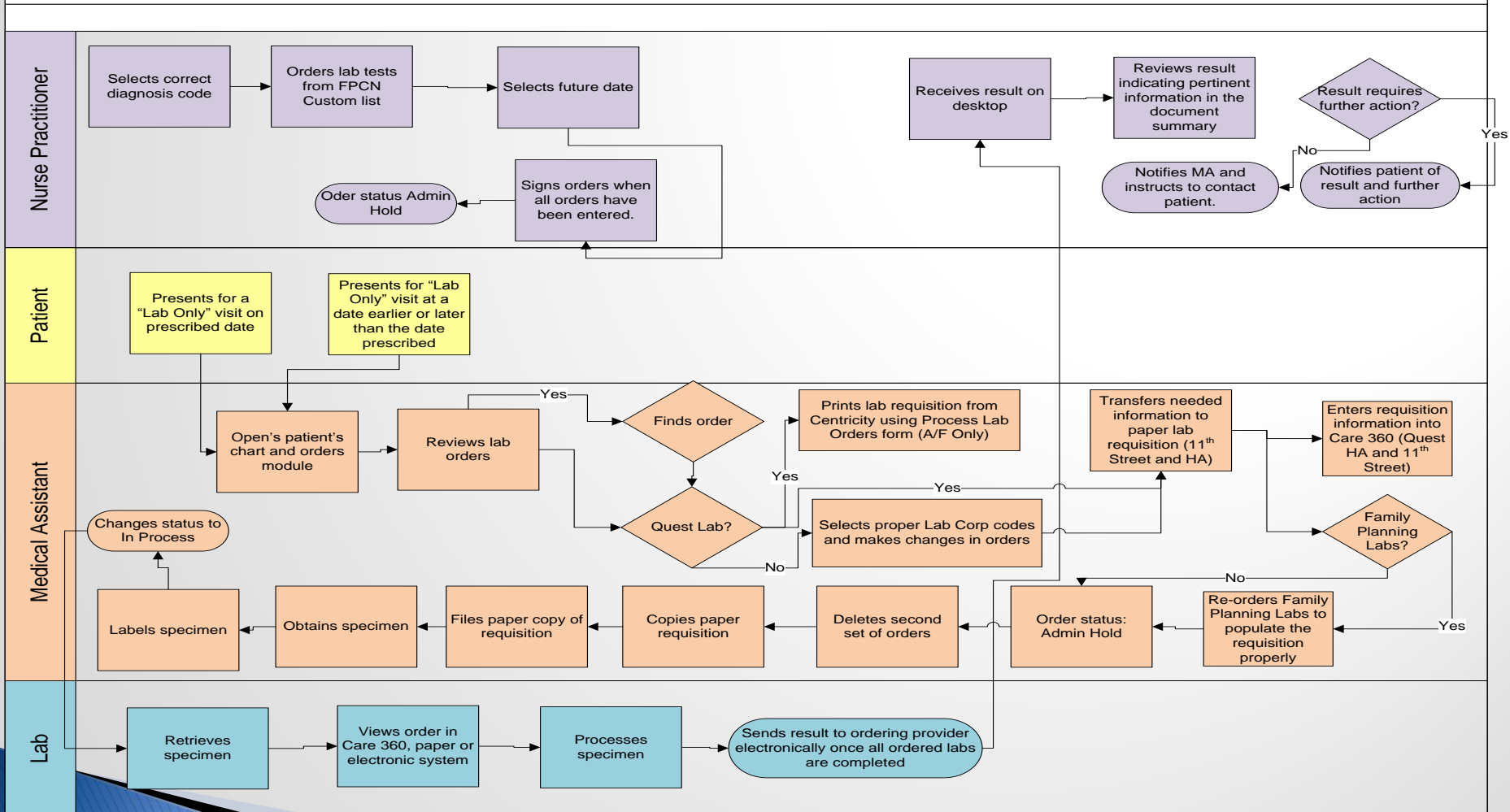
- Encourage all team members to meet and define what is the most important to them.
- Principles can vary from team to team as long as they are all congruent with the overall mission of the organization.
- The goal is that each team member has a sense of purpose that is aligned with the organizational mission.

Define Workflows

- Documenting workflows using process maps facilitates standardization which frees the team to problem solve for and with the patient as it becomes necessary.
- Workflows also define training needs, limit the amount of supervision required, and once documented can evolve as necessary with the practice.

Example of a workflow map

Lab Orders and Results Management for Labs Ordered in the Future at the Point of Care

Nurse Practitioner

Selects correct diagnosis code → Orders lab tests from FPCN Custom list → Selects future date

Oder status Admin Hold ← Signs orders when all orders have been entered.

Receives result on desktop → Reviews result indicating pertinent information in the document summary → Result requires further action?

Result requires further action? — Yes → Notifies patient of result and further action

Result requires further action? — No → Notifies MA and instructs to contact patient.

Patient

Presents for a "Lab Only" visit on prescribed date

Presents for "Lab Only" visit at a date earlier or later than the date prescribed

Medical Assistant

Open's patient's chart and orders module → Reviews lab orders

Reviews lab orders → Finds order — Yes → Prints lab requisition from Centricity using Process Lab Orders form (A/F Only)

Finds order — Yes → Quest Lab?

Quest Lab? — No → Selects proper Lab Corp codes and makes changes in orders

Quest Lab? — Yes → Selects proper Lab Corp codes and makes changes in orders

Selects proper Lab Corp codes and makes changes in orders — Yes → Transfers needed information to paper lab requisition (11th Street and HA)

Transfers needed information to paper lab requisition (11th Street and HA) → Enters requisition information into Care 360 (Quest HA and 11th Street)

Enters requisition information into Care 360 (Quest HA and 11th Street) → Family Planning Labs?

Family Planning Labs? — No → Order status: Admin Hold

Family Planning Labs? — Yes → Re-orders Family Planning Labs to populate the requisition properly

Re-orders Family Planning Labs to populate the requisition properly → Order status: Admin Hold

Order status: Admin Hold → Deletes second set of orders → Copies paper requisition → Files paper copy of requisition → Obtains specimen → Labels specimen → Changes status to In Process

Lab

Retrieves specimen → Views order in Care 360, paper or electronic system → Processes specimen → Sends result to ordering provider electronically once all ordered labs are completed

Communication

- Encourage teams to meet regularly
  - Teamlets should be huddling at least twice daily, preferably three times (beginning of the session, between sessions and at the end of the session)
  - Open access scheduling makes huddling challenging and increases the importance of EHR
  - Full teams should meet monthly or more often if there are specific initiatives underway (CQI initiatives, EHR changes, workflow changes, role changes, problem solving)

Standing Orders

- Facilitate team member autonomy
- Provide a framework for non-provider members of the team to simplify patient flow. (Patient flow is a key factor in improving provider capacity and therefore access)

Helpful Tools

- Incrementally expand the role of the MA
- Use CPS to facilitate regular teamlet huddles
  - Maximize the use of the summary screen
  - Schedule at least one huddle so that it occurs after the daily schedule is set in Open Access situations
- Enlist the help of the MA to manage panels
  - Run a weekly orders-results reconciliation report
  - Run weekly chronic disease reports: Diabetes, Asthma and HTN.
  - Run a weekly immunization report
  - Run weekly reports for cancer screens (mammography, pap smears and colonoscopy)
  - Adopt a process to contact and invite patients in for a visit as appropriate based on the report results. This process should include RN's, Care Managers, and Front Desk staff.

Discussion

▸ How does the attitude of clinical team impact successful transformation?

▸ How can organizational leadership positively influence the attitude of the clinical team

▸ What are the most effective measures of success?

Take Away Message

- Comprehensive primary care required and/or incentivized by most payers cannot be accomplished by the provider alone.
- Successful, high performing medical practices implement effective care teams.
- Practices successfully transitioning to this new model of care:
  - clearly articulate the vision for transformation
  - foster strong clinical leadership in each teamlet and then allow autonomy
  - encourage mastery and support the care teams in purposeful progress