



ADVANCING INTEGRATED HEALTHCARE

It's all about the Relationship: How Connection in Primary Care Occurs Among Team Members

Care Transformation Collaborative of Rhode Island

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Kick-off Nurse Care Manager | July 19, 2022

Disclaimers

- Current presentation is adapted from Learning Series provided to Prospect's Accountable Entity as part of a Learning Series to Nurse Care Managers, Social Workers and Health Coaches in Primary Care

CTC-RI Conflict of Interest Statement

Session presenters have no financial relationships with a commercial entity producing healthcare-related products used on or by patients.

All relevant financial relationships of those on the session planning committee have been disclosed and, if necessary, mitigated.

Objectives & CME Credits

- Define team-based care through a health equity lens as it applies to high-functioning health care teams
- Review best practices across five core values and skills for relational building in primary care
- Discuss what is working well and could be improved specific to relationship building in primary care among team members

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The AAFP has reviewed 'Advancing Comprehensive Primary Care Through Improving Care Delivery Design and Community Health,' and deemed it acceptable for AAFP credit. Term of approval is from 03/18/2022 to 03/18/2023. Physicians should claim only the credit commensurate with the extent of their participation in the activity. NPs and RNs can also receive credit through AAFP's partnership with the American Nurses Credentialing Center (ANCC) and the American Academy of Nurse Practitioners Certification Board (AANPCB).

Test your knowledge and take a poll

Test your knowledge

- Forty-two percent of primary care physicians report not having adequate time to spend with their patients;⁶
- In another study, patients were truly involved in only 9 percent of decisions affecting them.⁹
- Fifty percent of patients leave the visit without understanding what advice their physician gave;⁷
- Because they feel rushed, in one study physicians interrupted their patients' initial statement of their problems in an average of 23 seconds, and in 25 percent of visits, patients were never able to express their concerns at all;⁸

Source: Bodenheimer (2007)

“Too much work and not enough time to do it”

- Primary care visit = 15 min
- PCPs expected to provide acute, chronic and preventive care to patients while building meaningful relationships
- Estimates indicate it would take 7.4 hours per day to provide all recommended preventative care to a panel of 2,500 patients plus 10.6 hours to manage chronic conditions



How can a team help?

“Team-based health care is the provision of health services to individuals, families, and/or their communities by at least two health providers who work collaboratively with patients and their caregivers—to the extent preferred by each patient—to accomplish shared goals within and across settings to achieve coordinated, high-quality care.”

Diversity in Healthcare Teams and Implications

Estimated Race and Hispanic Origin and Gender Distributions in Health Care

Scroll table to see more >

	U.S. Physicians ^{T1}	Medical School Enrollees ^{T2}	Hospital Leadership ^{T3}	Medical School Leadership ^{T3}
White	67%	49%	88%	74%
Black	5%	8%	4%	9%
Hispanic	6%	7%	2%	4%
Asian	20%	23%	6%	13%
Female	35%	52%	35%	48%

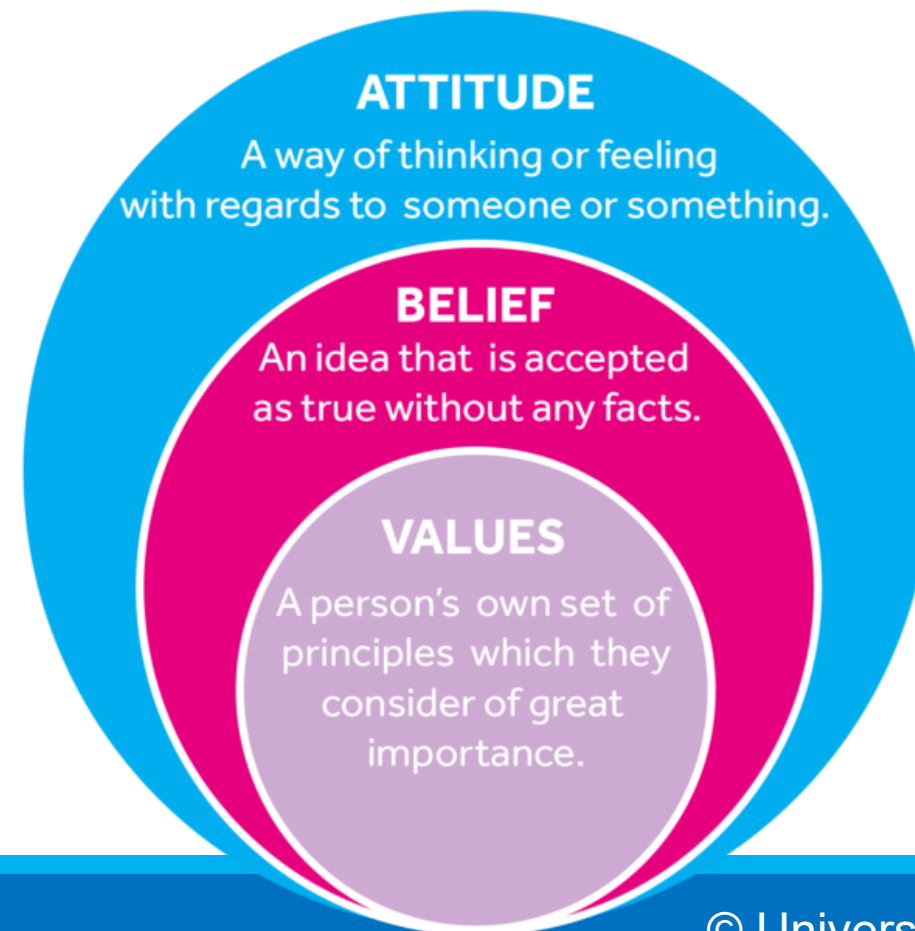
Sources: The leadership data is based on the authors' analysis of the organizations listed in the U.S. News & World Report rankings. T1. U.S. Department of Health and Human Services, Health Resources and Services Administration, National Center for Health Workforce Analysis. 2017. Sex, Race, and Ethnic Diversity of U.S. Health Occupations (2011-2015), Rockville, Maryland. <https://bhw.hrsa.gov/sites/default/files/bureau-health-workforce/data-research/diversity-us-health-occupations.pdf>. T2. Association of American Medical Colleges. Table B-3: Total U.S. Medical School Enrollment by Race/Ethnicity (Alone) and Sex, 2016–2017 through 2020–2021. https://www.aamc.org/system/files/2020-11/2020_FACTS_Table_B-3.pdf. T3. Harder B. 2020–21 Best Hospitals Honor Roll and Medical Specialties Rankings. U.S. News

“Good intentions are not enough..”



Values of High-Functioning Health Care Teams

White Board: What are most important values to team functioning?



Values of High-Functioning Health Care Teams

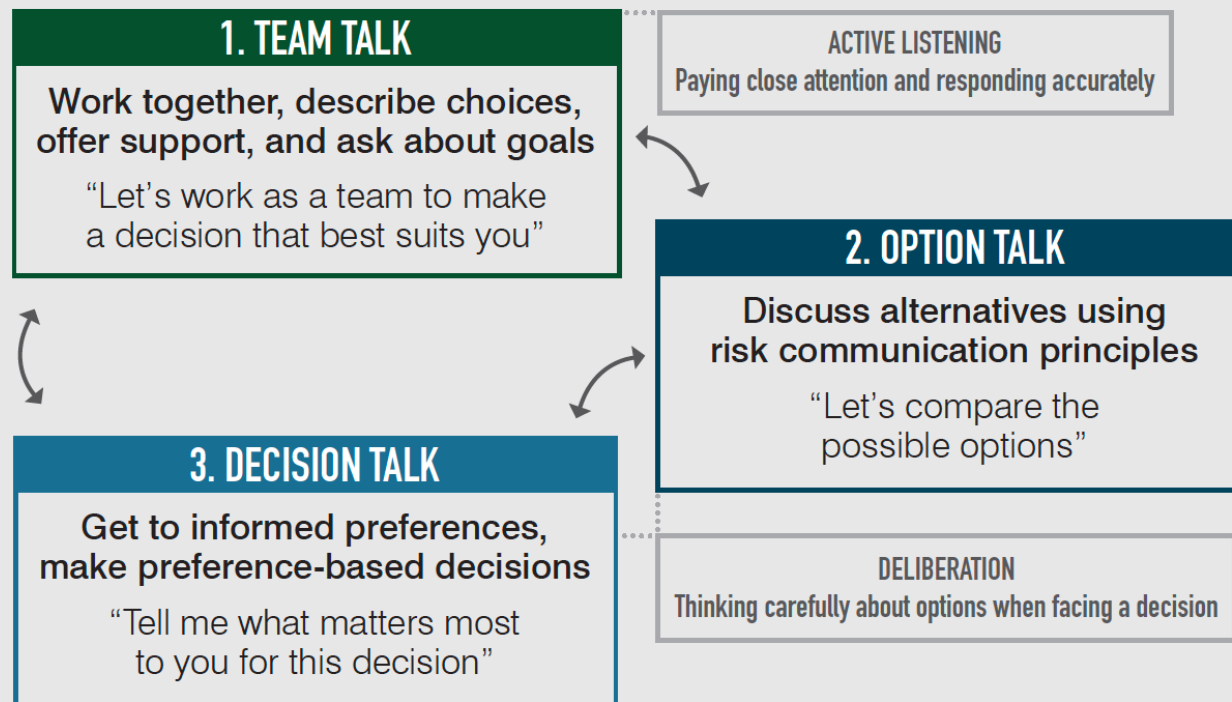
- **Honesty:** transparency about aims, decisions, uncertainty, and mistakes
- **Discipline:** develop and stick to their standards and protocols even as they seek ways to improve or when inconvenient
- **Creativity:** excited about tackling new or emerging problems and see errors and unanticipated bad outcomes as potential opportunities to learn and improve.
- **Humility:** can rely on each other to help recognize and avert failures, regardless of where they are in the medical hierarchy
- **Curiosity:** dedicated to reflecting upon lessons learned and using those insights for continuous improvement of their own work and the functioning of the team

Best Practices for Shared Goals

Shared Goals

The team—including the patient and, where appropriate, family members or other support persons—works to establish shared goals that reflect patient and family priorities, and that can be clearly articulated, understood, and supported by all team members.

Figure 1. Three-talk model of shared decision making



Source: BMJ 2017;359:j4891. DOI: 10.1136/bmj.j4891.

Best Practices for Clear Roles

Clear Roles

There are clear expectations for each team member's functions, responsibilities, and accountabilities, which optimize the team's efficiency and often make it possible for the team to take advantage of division of labor, thereby accomplishing more than the sum of its parts.

G.A.T.H.E.R.

The Essentials of Primary Care Behavioral Health

Here's a way to remember the key features of PCBH work:

G ENERALIST	The BHC is a generalist who sees any behavioral issue and all ages.
A CCESIBLE	Most BHC services are available on a same-day basis.
T EAM-BASED	The BHC is a regular member of the team and is ready to help in a variety of ways, such as pre-PCP visits, after-PCP visits, classes, group medical visits, and assisting with resources.
H IGH PRODUCTIVITY	The BHC sees 10 or more patients every day.
E DUCATOR	The BHC teaches behavioral interventions to others on the team.
R OUTINE PATHWAYS	The BHC helps the team develop pathways or protocols that routinely involve BHC help in care for high-impact patient groups.

Let's **G.A.T.H.E.R.** together!

Best Practices for Mutual Trust

Mutual Trust

Team members earn each other's trust, creating strong norms of reciprocity and greater opportunities for shared achievement.

5 WAYS TO HELP CREATE PSYCHOLOGICAL SAFETY



1. MAKE
it an explicit
priority.



2. FACILITATE
everyone
speaking up.



3. ESTABLISH
norms for how
failure is handled.



4. CREATE
space for new ideas
(even wild ones).



5. EMBRACE
productive
conflict.

Best Practices for Effective Communication

THE MOOD ELEVATOR

- grateful
- wise
- creative
- resourceful
- hopeful
- appreciative
- patient
- sense of humor
- flexible
- ◀ curious
- impatient
- irritated
- worried
- defensive
- judgmental
- self-righteous
- stressed
- angry
- depressed

Effective Communication

The team prioritizes and continuously refines its communication skills. It has consistent channels for candid and complete communication, which are accessed and used by all team members across all settings.



the mood elevator

- grateful
- wise, insightful
- creative, innovative
- resourceful
- hopeful, optimistic
- appreciative
- patient, understanding
- sense of humor
- flexible, adaptive
- curious, interested
- ◀ impatient, frustrated
- irritated, bothered
- worried, anxious

Our **CONNECTION** to others and to the **WORLD** **DEPENDS** on how well we **MANAGE** the **UP-AND-DOWN RIDE.**

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Best Practices Measurable Processes/Outcomes

Measurable Processes and Outcomes

The team agrees on and implements reliable and timely feedback on successes and failures in both the functioning of the team and achievement of the team's goals. These are used to track and improve performance immediately and over time.

You can't manage what
you don't measure.

Peter F. Drucker

quote fancy

Putting it all together

- “It is reassuring and helps make the work a bit lighter when you know that you are making a difference and achieving outcomes.”
 - “It has given teams the opportunity to take a step back and level set expectations and priorities based on the initiative. It fostered collaboration and streamlined communication, processes, and opportunities for efficiencies.”
 - “As a clinician I always "feel better" when a patient is getting the right care at the right time, by the right healthcare professional. It brings a sense of joy knowing that a patient is not sitting in a ED just to go home and follow up w/PCP after no interventions that were acute were to be had.”

Thank you and Questions

**“Change moves at the
speed of trust.”**

Stephen M. R. Covey
Writer and Public Speaker

Topics to look forward to in 2022

- August: Older Adults and Opiates
- September: Team Based Care and Diabetes
- October: Team Based Care and Hypertension

Mark your calendars 3rd Tuesday of the month at 8am

Applications Open!

Nurse Care Manager/Care Coordinator Standardized Core Curriculum (GLearn) Program

12-15 week program for Nurse Care Managers and Care Coordinators

- Interactive web-based module
- Weekly facilitated collaborated discussions
- Case Study Capstone Presentation
- Earn up to 18.5 RN CEU's and 18.54 CCM credits

Applications due July 22nd.

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