



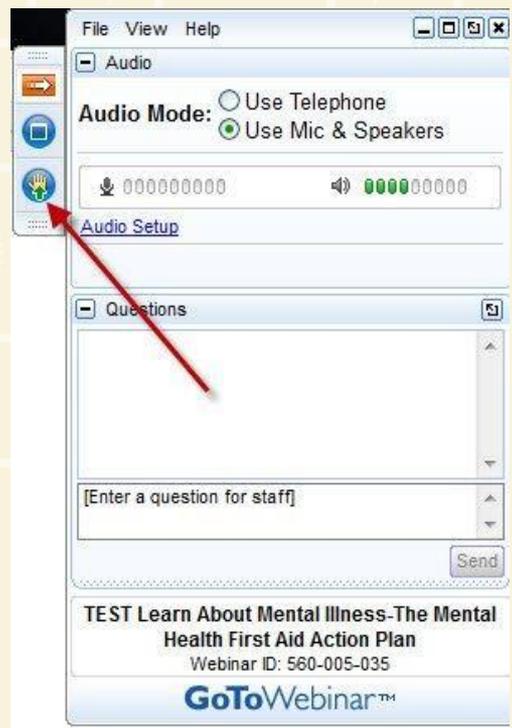
SAMHSA-HRSA Center for Integrated Health Solutions

Developing High Functioning Teams Innovation Community

Webinar #4

March 13, 2015

How to ask a question during the webinar



If you dialed in to this webinar on your phone please use the “raise your hand” button and we will open up your lines for you to ask your question to the group. **(left)**



If you are listening to this webinar from your computer speakers, please type your questions into the question box and we will address your questions. **(right)**

Today's Agenda



- Implementation Planning
- Hear from colleagues
- CIHS Resources

In February



Seven Ways to Build High Functioning Healthcare Teams

Paul Ciechanowski, MD, MPH



- Conduct systematic case reviews
- Make data a team member
- Invest in the team to build relationships

Implementation Plans



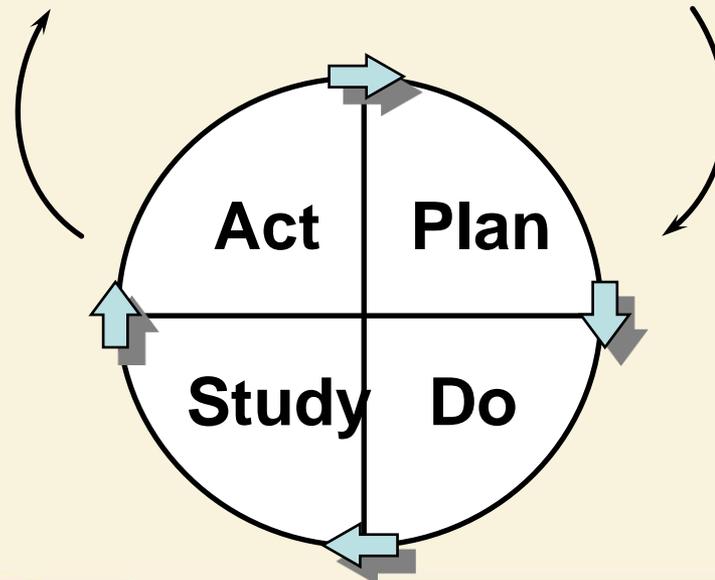
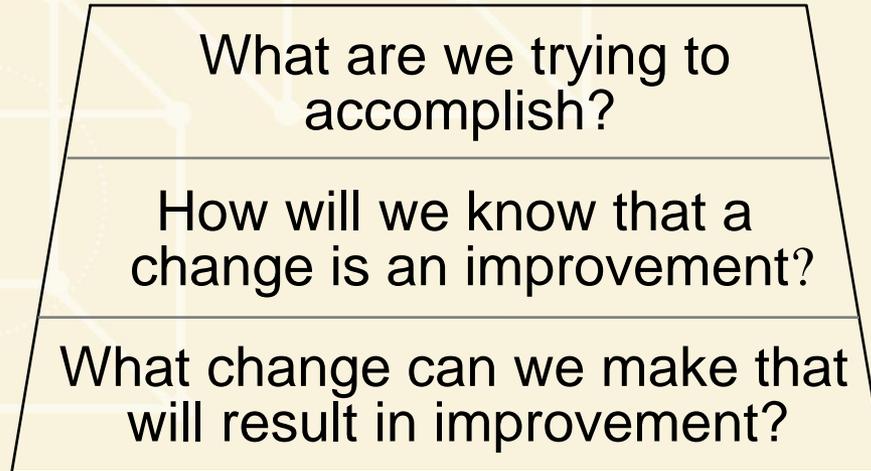
Implementation Objective #1:

Action Steps	Champion	Timeline	Learnings, challenges & opportunities
3/1/15			
5/1/15			
7/1/15			

You Said...

- ❖ Define goals and milestones
- ❖ Test care coordination workflows
- ❖ Try huddles and hand-offs
- ❖ Identify population and do risk stratification
- ❖ Conduct staff training on medical / MH conditions
- ❖ Choose measures and work on IT capability for tracking
- ❖ Administer team process & satisfaction tools

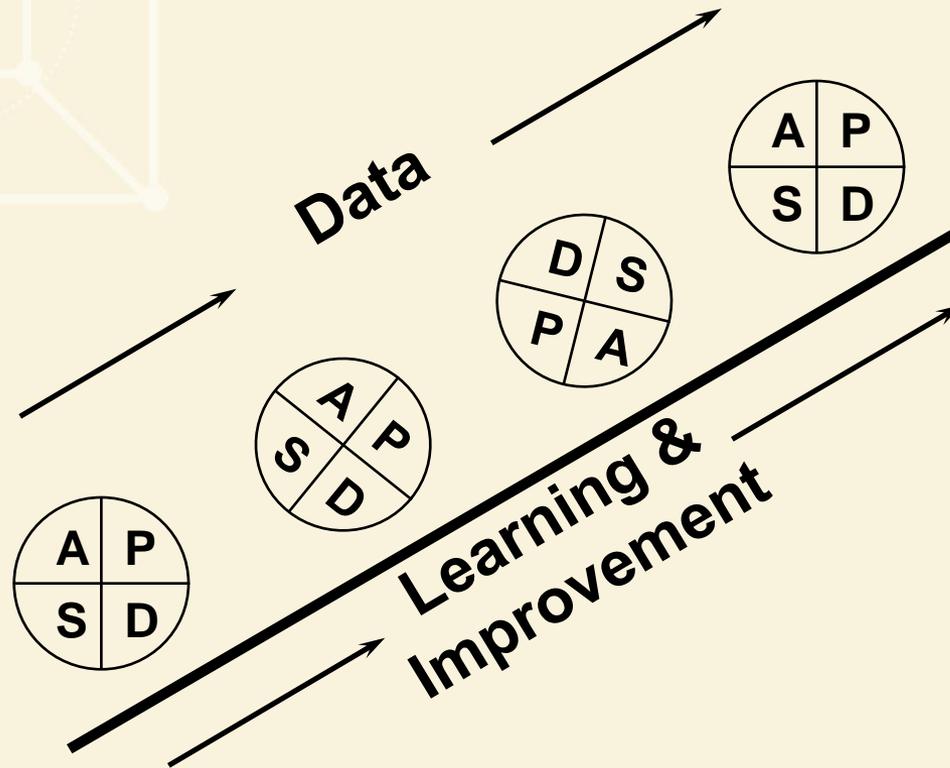




An Iterative Process

**Changes That
Result in
Improvement**

**Predictions,
Theories,
Ideas**



Hearing from Colleagues



Today!
 Children's Hospital of Pittsburgh, PA

May	June	July	Aug
Canyon Pediatrics, AZ	Florida Dept of Health in Sarasota Co / CHC of North Port, FL	Jewish Family & Children's Services, AZ	Southwest BH Services, AZ
CODAC BH Services, AZ	Harbor, OH	LIFECORE Health Group, MS	United Community and Family Services, CT
Connections, DE	Hamakua Health Center, HI	Lutheran Family Services, NE	Vocational Instruction Project Community Services, NY
Family Alliance, IL	Henderson BH, FL	Midtown Community Mental Health, IN	White Earth BH, MN
Family First Health, PA	JeffCare, a program of JPHSA, LA	Myrtle Hilliard Davis Health Centers, MO	Will County CHC, IL

Measuring Team Process: Hitting the bulls eye in setting up a model of a subspecialty medical home



Eva Szigethy MD, PhD

Associate Professor of Psychiatry, Pediatrics and Medicine
Director, Visceral Inflammation and Pain (VIP) Center
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University of Pittsburgh

What is a patient centered medical home?

Prominent Component of Health Care Reform Law



Combines **primary care** with systematic improvement of care of a patient population

- **Personal physician providing first contact and continuous care**
- Implementation of **information technology**
- New operations for **communication** between physicians and patients

Why a medical subspecialty medical home?

Subspecialty care (e.g. cardiology, endocrinology, gastroenterology) is expensive and approximately 15% of patients have high medical utilization but lack of improvement in their medical condition.

> 50% of IBD patients have pain, stress, coping difficulties, anxiety/depression, and fatigue that lead to worsening inflammation and increased healthcare utilization.

IBD ranks as top three expensive medical diseases in most tertiary care medical centers due to relapsing remitting course, expensive medications and surgery with 15% patients accounting for over 50% of the medical costs.

What is our patient centered subspecialty medical home?

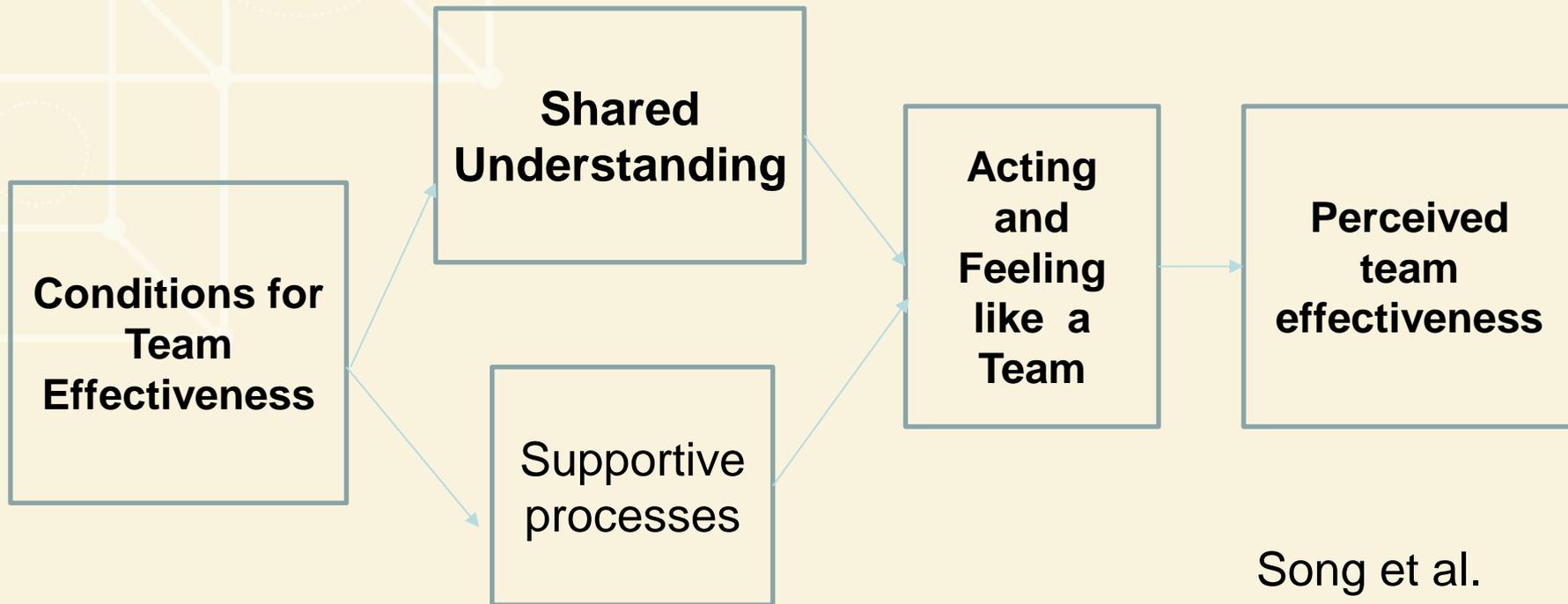
Use ***a team-approach*** to provide high quality, comprehensive, cost-effective healthcare to patients with one such chronic disease, inflammatory bowel disease (IBD)

Integrated medical and behavioral care at medical point of service

Collaborating with our UPMC Health plan (insurance payor) to couple a new collaborative model with health care payment reform strategies

Importance of team process

“Team-based care is key tenet to transform primary care practices into primary care medical homes”



Song et al.

Primary Care Team Dynamics Process Survey (Song et al. 2014, Health Services Research)

Conditions for Team Effectiveness

- Enable structure
- Supportive organizational context

Shared Understanding

- Team Goals
- Member roles and responsibilities
- Patient involvement

Supportive processes

- Accountability
- Decision-making and conflict resolution
- Communication and information exchange

Acting and Feeling like a Team

- Using team skills and knowledge
- Giving/using information from others
- Trusting/Respecting others

Perceived team effectiveness

- For patients
- For providers
- For efficiency

Characteristics of “smart” teams (Pentland & Hashimi, Science 2010)

Members contributed equally to team discussions
(versus letting a few dominate discussion)

Members scored higher on test which measures
how well people can read complex emotional
states from images of faces with only eyes
visible.

Having more women members of the team.

“Mind in the Eyes Test”



“Mind in the Eyes Test”



Mouse over to zoom

Reading the Mind in the Eyes Test (Revised, Adult)

Practice Question

Which word best describes what the person in the picture is thinking or feeling?

- hateful
- jealous
- arrogant
- panicked

IBD Medical Home - Optimizing Behavioral Outcomes

● TEAM APPROACH

- Weekly team huddles with coordination among providers and review of electronic records
- Coordination with other key collaborators- pain service
- Social worker-nurse team as primary patient liaisons

● QUALITY

- Team members with expertise and high empathy scores
- Coordinated use of tools offered by Health Plan
- Empirically supported behavioral interventions
- PATIENT centered care with goal of self disease management



IBD Subspecialty Medical Home Team

- Nurse practitioner
- Nurses
- Social worker
- Dietician
- Patient Peer support team
- Schedulers
- Research coordinator
- Psychiatrist
- Gastroenterologist (missing from photo)



Resources!

Resources on High Functioning Teams:

- [Essential Elements of an Integrated Team](#)
- [Core Competencies for Integrated Care](#)

For next month's webinar:

- [AIMS Center Team Building Tool](#)



Next Steps

- **Late March – Early April: Small group calls**
 Max: 7 attendees each
- **April 14 3 - 4pm EST: Webinar #5**
 Anna Ratzliff, MD, PhD
 University of Washington, AIMS Center

STEP 1: Staff Self-assessment

Conditions for which you plan to provide clinical care (select all that apply)

Depression
 Anxiety (e.g. PTSD)

Substance Abuse
 Other Mental Disorders



AIMS CENTER
Advancing Integrated Mental Health Solutions

Integrated Care Tasks	Is This Your Role Now?		If No, Whose Role? Write in position title	Your Organization's Capacity with This Task?		Your Level of Comfort with This Task		Would You Like Training to Perform This Task?	
	Yes	No		High	Med/Low	High	Med/Low	Yes	No
Identify and Engage Patients									
Identify People Who May Need Help	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Screen for Behavioral Health Problems Using Valid Measures	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>



SAMHSA-HRSA Center for Integrated Health Solutions

**Slides for today's webinar are
available on the CIHS website at:**

www.Integration.samhsa.gov

under About Us/Innovation Communities



SAMHSA-HRSA Center for Integrated Health Solutions

Thank you for joining us today.

**Please take a moment to provide your
feedback by completing the survey at the
end of today's webinar.**