

Phase II: Develop Integrated Complex Care Systems (Whole Health Homes)

DOMAIN 7: BUILD THE MULTIDISCIPLINARY COMPLEX CARE TEAM

Activities

July - Oct 2016

Oct 2016 - Feb 2017

Feb - July 2017

Change Areas

Identify team members and practices to build a high performing multidisciplinary team.

- Clarify key ICCM team roles
- Develop sample role descriptions that include BHICCI integrated care core competencies and personal "right fit" qualities
- Provide TA re: hiring including recruitment strategies, sample interview questions
- Track and assist teams with IEHP credentialing of licensed providers
- Train/test regarding practice of key team roles

- Provide ongoing coaching and training to improve knowledge/ practice skills for key roles of ICCM team (CM, CC, BH clinician, health navigator/peer supporter)
- Use staffing "Capacity Gap Analysis" tool (Jarvis) to refine roles/ staffing needs related to size of clinic and target population

- Coach team leaders/ members to provide orientation and training for new team members and/or expanded ICCM teams

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Activities

July - Oct 2016

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Jul 2017 - Feb 2018*

Improve team communication and process workflows.

Change Areas

- Coach team to test and implement strategies for team engagement and effective communication (SBAR, reflective listening, etc)
- Provide training and other development activities to promote effective team communication
- Map current workflows to identify and clarify key team roles and processes
- Map client care experience (access through treatment and follow-up) to highlight strengths, gaps and core ICCM care processes from patient perspective
 - Include patient/family advisors in mapping process

- Coach continued testing and implementation of evidence based team communications (Coach)
 - Team leader/team uses employee experience measures to guide improvement
- Design, test and implement standard workflows and standing orders to improve routine process such as screening, sharing coordinated care plans, clinical consultation and specialty referrals
- Develop priority areas and strategies to improve customer experience service and experience (front desk through treatment)

- (Coach) Team leader continues to refine assessing, testing and implementing team communications improvements
- Implement and spread use of standard work flows and standing orders for routine processes

- HCO Leader tests and spreads employee experience measurement and communications improvement processes throughout the HCO

*Through BHICCI end-point.

BHICCI Phases of Coaching



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References

TeamSTEPS-a teamwork system, AHRQ and the Department of Defense,
<http://www.ahrq.gov/teamsteps/instructor/index.html>

Cambridge Health Alliance Model Toolkit: nuts and bolts of team processes, huddles
http://www.integration.samhsa.gov/workforce/team-members/Cambridge_health_alliance_team-based_care_toolkit.pdf

AIMS Center web site includes multiple resources: aims.uw.edu

- <https://aims.uw.edu/collaborative-care/team-structure>
- <http://aims.uw.edu/sites/default/files/ClinicalWorkflowPlan.pdf>

Structured Communication to build the highly effective team: SBAR
<http://www.ihl.org/resources/pages/tools/sbartoolkit.aspx>

UCSF Center for Excellence in Primary Care, <http://cepc.ucsf.edu/tools-transformation>
Core Principles and Values of Effective, Team-Based Health Care, National Academy of Sciences (2012)
<https://www.nationalahec.org/pdfs/VSRT-Team-Based-Care-Principles-Values.pdf>