

Using Clinical and Team Metrics to Engage and Measure Team Effectiveness in Federally Qualified Health Centers in Colorado

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Building Skills For Effective Teams: Statewide Collaboration Program



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Four Program Objectives



Building Skills
for Effective
Teams
Program



Introduction to
IPCP Team
Skills for
Students



IPCP Team
Leadership
Seminar for
Students



IPCP Clinical
Educator –
Preceptor
Program

← Leadership Development of Soft-Skills, IPCP Competencies & Engagement → TEAM

Project Partners

▶ Co-Leaders

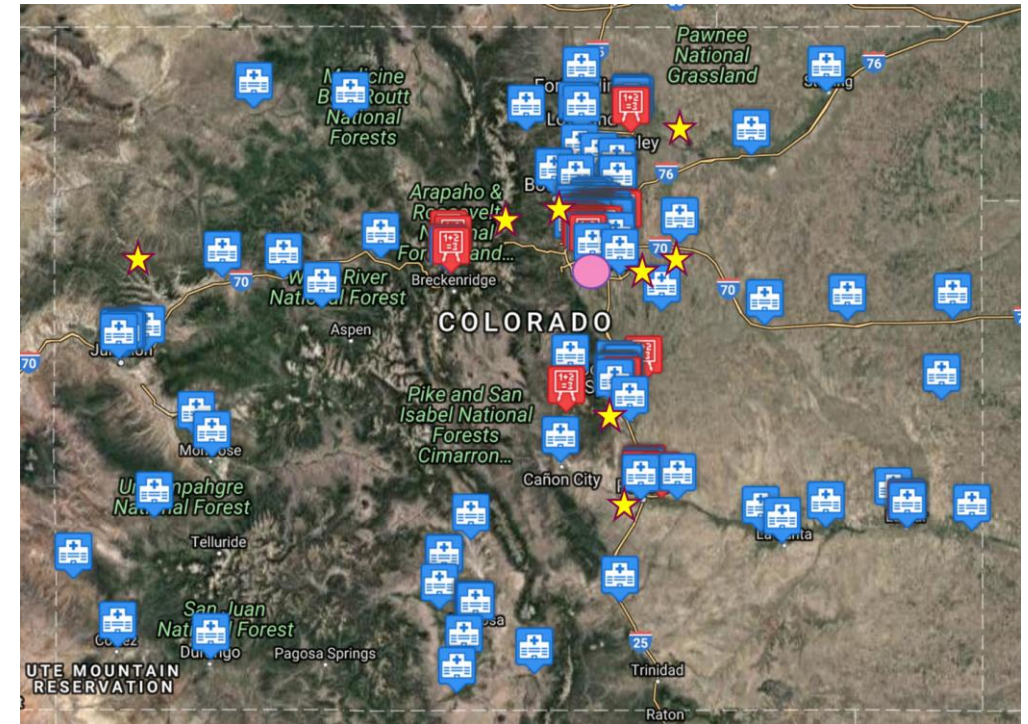
- ▶ Colorado Center for Nursing Excellence (grant recipient)
- ▶ Rocky Vista University – School of Osteopathic Medicine

▶ Clinical Partner

- ▶ Colorado Community Health Network – representing 22 FQHCs and 186 community health clinics across Colorado.

▶ Academic Partners

- ▶ University of Colorado – School of Medicine, Physicians Assistant Program, School of Dentistry, School of Pharmacy, and Nursing
- ▶ University of Colorado – Colorado Springs School of Nursing
- ▶ University of Northern Colorado School of Nursing
- ▶ Regis University School of Nursing and School of Pharmacy
- ▶ Colorado Mesa University School of Nursing
- ▶ Colorado State University School of Nursing
- ▶ Red Rocks Physician Assistant Program
- ▶ Rocky Vista University – School of Osteopathic Medicine



Setting Stage for Using Metrics to Enhance Team Performance

Baseline
Metrics: Team
and Clinical

Educational
Program and
Focused Team
Capstone

Follow-up
Measures:
Team and
Clinical

Sustainability
and Ongoing
Process
Improvement

This project builds on lessons learned from a 3 year grant. (Teams with Providers had higher statistically significant improvements in metrics than teams without Providers.) Metrics evaluated by team and clinic. We will examine results longitudinally by clinic over five years.

Team Metrics

Foundational to Improving Clinical Metrics

▶ Team Excellence Baseline Assessment → 8 Principles of Effective Teams

- ▶ Clear and Elevating Goal
- ▶ Results Driven Structure
- ▶ Competent Team Members
- ▶ Unified Commitment
- ▶ Collaborative Climate
- ▶ Standards of Excellence
- ▶ External Support & Recognition
- ▶ Principled Leadership

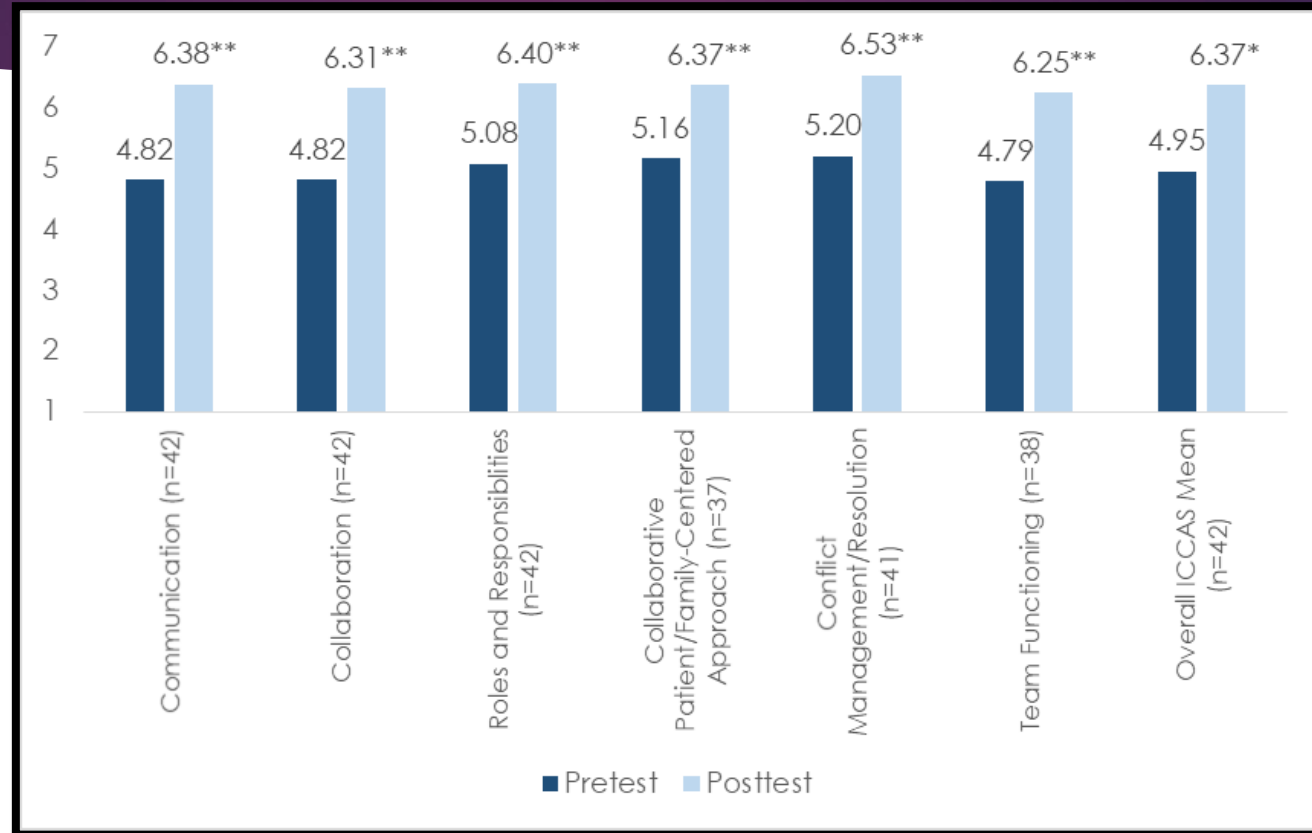


▶ Pre-Post Intent-to-Leave Provider Satisfaction Survey – 3 Question Survey

▶ Pre-Post ICCAS Questionnaire – Interprofessional Competencies 6 Domains

- ▶ Communication
- ▶ Collaboration
- ▶ Roles and Responsibilities
- ▶ Collaborative Patient and Family Centered Care
- ▶ Conflict Management/Resolution
- ▶ Team Functioning

Cohort 1: Interprofessional Collaborative Competency Pre-Post



** Indicates a statistically significant change at $p < .001$.

* Indicates a statistically significant change at $p < .05$.

Clinical Metrics

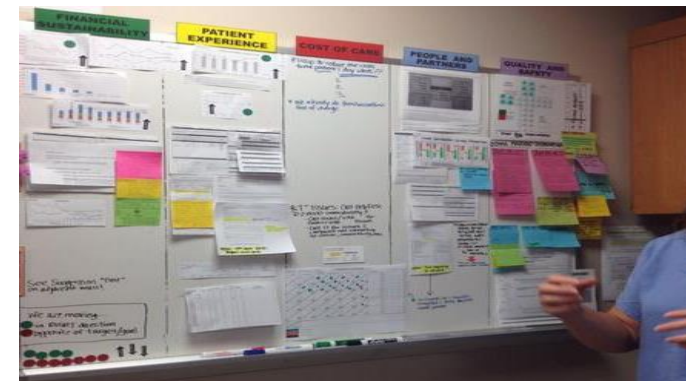
Each Team Identifies 2 Uniform Data Set (UDS) & 1 Patient Satisfaction Metric

▶ Examples of UDS Metrics:

- ▶ Increase childhood immunizations
- ▶ Increase Cervical Cancer Screening for patients 24-64
- ▶ Increase indicated placement of sealants on patients aged 6-9
- ▶ Identify Trimester of Entry for prenatal care
- ▶ Increase Colorectal screening
- ▶ Improved Diabetes Management and HgbA1C
- ▶ Initiate Tobacco Cessation Screening and Treatment
- ▶ Improve Obesity Screening and Nutritional Education for all ages
- ▶ Improve Depression Screening
- ▶ Increase Mammography

▶ Examples Patient Satisfaction Metrics:

- ▶ Patient wait times
- ▶ Patient referrals
- ▶ Enhanced group visits
- ▶ Clarity of patient treatment information, education and self-management goals
- ▶ Patient Satisfaction with Teamwork between doctor and staff
- ▶ Patient engagement on advisory groups



Each team creates an interactive visual management board for engaging with team during huddles and staff meetings.

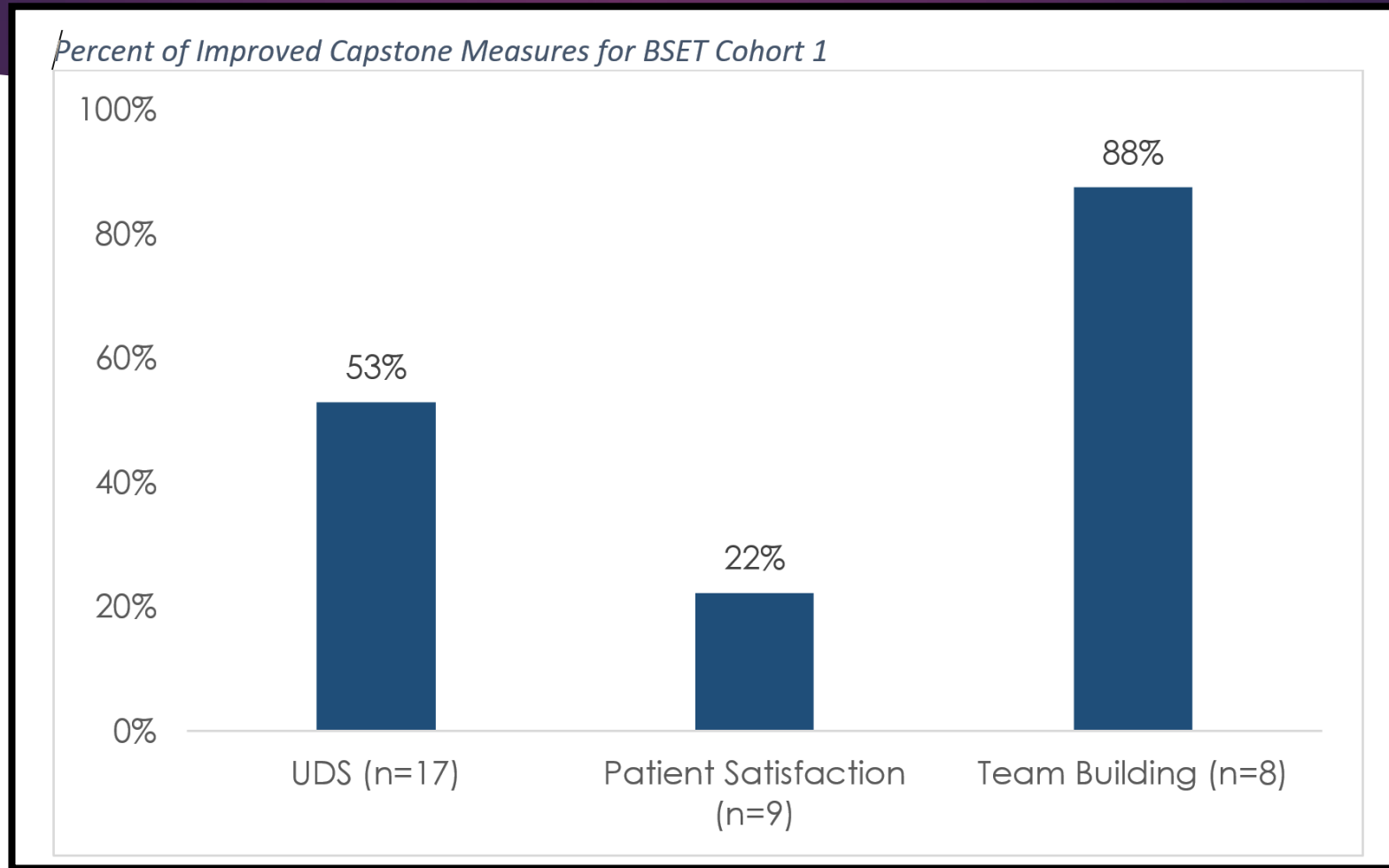
Rapid-Cycle Process Improvement focused on UDS measures:

- ▶ Understand the Measure and Data
- ▶ Create a team – Strategic Inclusion of “right stakeholders”
- ▶ Map the process and workflow
- ▶ Identify a strategic goal
- ▶ Develop and conduct PDSAs with clear tracking/evaluation (pilot team/clinic)
- ▶ Communicate to team and seek feedback
- ▶ Disseminate and integrate effective strategies for long-term sustainability and further improvements



“Mr. Potato-Head” PDSA Exercise

Cohort 1: Capstone Outcomes



*Improvement represents a minimum of a 5% increase.

How do Clinical Metrics engage Team?

- ▶ FQHC's are mission-driven focused on serving the underserved
- ▶ Improving patient outcomes → significant to employees
- ▶ Gives focused meaning and purpose
- ▶ Creates a sustainable process improvement
- ▶ Allows clinics to measure performance against national standards



“Our team was so focused on the metrics that it was not until the end that we realized the program was really all about developing relationships, improving communication and building teams. The metrics gave us a legitimate focus point that we all agreed upon to impact the care of our patients. And, we learned that the only way to improve the care was to build a team and to grow our competency and emotional intelligence as individuals.” K.D. Medical Director

Overcoming Challenges When Using Metrics

- ▶ **Understanding Metrics**
- ▶ **Electronic Health Records and Credibility of Data**
- ▶ **Selective Inclusion: Business Development & Quality**
- ▶ **PDSA Process Improvement: “*Real change is a slow process!*”**
- ▶ **Sustainability: Integration into clinic as “routine” work → Huddles, Policies & Orientation**



Next Steps: Making Meaningful Long-term Change



Disseminating and Networking:

- ▶ Working with Colorado Community Health Network and Colorado Department of Public Health and Environment for Dashboard and Resource Tools
- ▶ Clinic Reports and Capstone Celebration – Share best practices and strategies for process improvement internally and across clinics
- ▶ Linking Teams → Creating handoff process to build on previous team for ongoing improvement

Questions?

▶ Contact Information:

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