

This is part of a series of Issues Briefs framing the complex issue of affordability. These briefs can be used to initiate conversations with stakeholders in your community.

What is Team-based Care?

The health care needs of Americans are often complex, as is the health care system patients have to navigate during an illness. To better support patients and their families through an acute or chronic illness, hospitals and health systems are adopting team-based models of care that encompass patients' medical and social needs across the care continuum. Team-based care is a promising, low-tech approach that allows health care workers from varying professional disciplines to provide customized, patient-centered care to manage the physical, psychological and spiritual needs of their patients.

As hospitals and health systems continue to move toward value-based care, team-based approaches provide a pathway to value by improving outcomes, enhancing the patient experience and reducing cost. This issue brief explores how to build effective care teams and how organizations can utilize team-based models to improve value.

Creating Interdisciplinary Care Teams

Interdisciplinary care teams take the multidisciplinary approach to the next level by ensuring that the providers work collaboratively, rather than just alongside one another. Interdisciplinary care teams bring together health care professionals from several disciplines to work towards a common goal, allowing each team member to draw on their discipline's unique skills and capacities. This group of a clinical and non-clinical professionals coordinate their actions for a common purpose – either the prevention and treatment of disease or the promotion of health.

Defining Team-based Care

National Academy of Medicine defines **team-based care** as “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.”¹

Though often used interchangeably, multidisciplinary and interdisciplinary differ in their form and function.

Multidisciplinary Care Teams: A team composed of members from more than one discipline, offering patients a greater breadth of services. Team members work independently and in parallel, with each provider responsible for his or her own area. Communication between team members is formal, and team structure is often hierarchical with a designated leader overseeing the team.

Interdisciplinary Care Teams: A team of professionals from various disciplines are involved in reaching a common goal, with each team member bringing his or her discipline's expertise to the team. Team members work formally and informally, and information is shared in a systemic way among team members. An interdisciplinary team is collaborative and integrates each profession's knowledge into the care plan.²

And, each team member is encouraged to function to the fullest extent of their education, certification and experience to reach optimal care outcomes.

Interdisciplinary teams come in various shapes and sizes – and team membership may even be fluid and interchangeable – depending on the needs of the patient. Interdisciplinary team members may include: physicians, nurses, physician assistants, specialists, social workers and non-clinical professionals, such as chaplains or community health workers. Extended team members also may come from outside of the hospital to address the patient’s social needs, such as partners at community-based and social service organizations, schools or faith based organizations.

Creating effective interdisciplinary teams should be an intentional and concerted effort. The National Academy of Medicine identified five core principles to enable care providers to foster effective care teams. Those principles are:

Shared Goals. The team establishes shared goals that reflect the priorities of the patient and family. The goals are clearly articulated, understood and supported by all team members.

Clear Roles. There are clear expectations for each team member’s functions, responsibilities and accountabilities.

Mutual Trust. Team members trust one another and feel safe to admit a mistake, ask a question, offer new data or try a new skill without fear of embarrassment or punishment.

Effective Communication. The team prioritizes and continuously refines its communications skills and has consistent channels for efficient, bidirectional communication.

Mutual Processes and Outcomes. There is a reliable and ongoing assessment of team structure, function and performance that is provided as actionable feedback to all team members to improve performance.



Palliative Care for Serious Illness

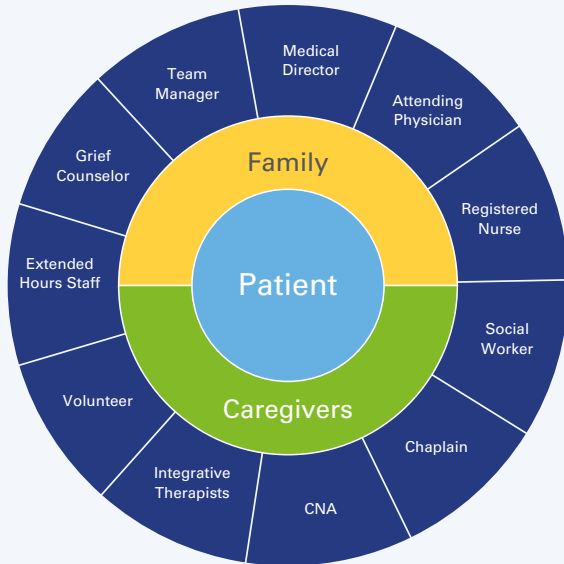
Patients with serious illness can benefit from palliative care – specialized care focused on relief from the symptoms and stresses of an illness. Palliative care is delivered through interdisciplinary care teams that include specially trained physicians, nurses, and other specialists who work together with a patient’s other doctors to provide an extra layer of social, emotional and medical support. The goal of palliative care is to improve quality of life for both patients and their caregivers by surrounding seriously ill individuals with personalized medical and social support. Learn more about how palliative care improves value for patients with serious illness [here](#).

Fostering the team dynamic is a continuous process. These principles should be implemented intentionally and worked on and refined so that over time, team-based models become ingrained into a hospital’s culture.

As hospitals assemble interdisciplinary care teams, they should be mindful to keep the patient and their family as central members of the team. Team members should understand the medical, social and emotional needs of the patients, and structure their work to achieve the goals articulated by the patient.

Figure 1 is adapted from the nursing home setting and demonstrates the breadth of health

Figure 1. Putting the Patient at the Center of the Care Team



care providers involved in providing patient care. The team members in the outer ring are interchangeable based on the patient’s needs and could also include community-based team members.

Team-based Care Improves Value

By adopting team-based care models, hospitals can improve value for the patients they serve. There is a growing body of research that points to team-based care being an effective lever to improve all three components of the value equation – quality and outcomes, patient experience and cost. A study from the American College of Cardiology found that team-based care led to improved quality of care, increased patient satisfaction, more efficient care and improved financial outcomes.⁴

Implementing team-based care requires hospital leaders to examine how care is organized, how health professionals interact with each other and with patients, and how health care providers are educated and trained.⁵ The skills needed to work as a team are not innate – they must be learned.

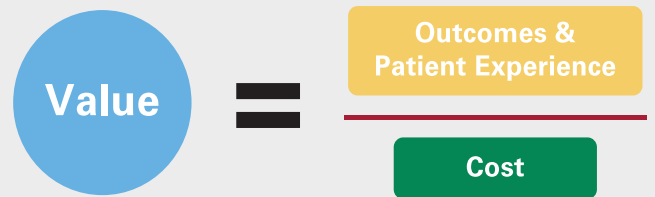
Making the cultural and operational shift toward team-based care requires an investment in training

for hospital staff. Care providers need training and coaching on how to work with providers from diverse professions, and hospital administrators need to revise processes for patient care to design how interdisciplinary team members engage with patients and enable seamless virtual communication between members. Over time, these process improvements alter the culture of how health professionals collaborate to provide care.

Hospitals across the country have demonstrated that investing in team-based care enables them to make improvements in value and help them achieve their hospital’s strategic goals. Below are examples of hospitals tackling the three components of value.

AHA’s Value Equation

Through *The Value Initiative*, the AHA is addressing affordability through the lens of value to improve outcomes and enhance the patient experience while reducing cost.



Source: American Hospital Association, 2018.

Outcomes

Team-based care can improve quality of care and outcomes for patients. Teams that communicate effectively and demonstrate mutual support reduce the potential for error, resulting in enhanced patient safety and improved clinical performance.⁶

Hospitals should consider both process and outcomes metrics as they measure the impact of team-based care on quality and outcomes. For example, processes can be made more seamless and efficient through care teams. Those improvements may be reflected in patient outcomes measures, such as reductions in



complications and readmissions rates or improved management of chronic diseases.

The hospitals profiled below show the impact that team-based care can have on clinical quality and outcomes.

Clinch Valley Medical Center in Virginia partners with the Appalachia Agency for Senior Citizens to avoid readmission and emergency department visits (ED). A core team from CVMC and AASC, including case workers, pharmacists, respiratory therapists and representatives from administration and a primary care clinic, make home visits to recently discharged patients to address upstream health issues and social determinants of health that may hinder patients' recovery and well-being. At any time, the team tracks the needs of approximately 15 to 22 patients with co-morbidities and complex health issues, texting each other to provide services when concerns arise. The team has been able to reduce avoidable readmissions from 11.8% to 7.8% and reduce costs for consumers.

MetroHealth in Cleveland trained all its staff in the TeamSTEPPS methodology and implemented it widely across the hospital. They established 15 Action Councils that developed and evaluated quality improvement projects focused on patient safety, the patient experience and optimizing processes. Through TeamSTEPPS, they were able to improve patient safety scores and are continuously working to improve the patient experience.

AHA's Team Training Improves Quality and Outcomes

TeamSTEPPS offered through AHA Team Training is an evidence-based approach that teaches clinical and non-clinical providers to communicate more effectively, empowering them to create and sustain a culture of quality and safety. Based on safety movements in high-risk fields like aviation and the military, TeamSTEPPS focuses on four key competencies: communication, leading teams, situation monitoring and mutual support. Health care teams that communicate effectively and have mutual support reduce the potential for error, resulting in enhanced patient safety and improved performance. Teamwork training such as TeamSTEPPS is associated with significant improvements in results in the Hospital Survey on Patient Safety Culture and has shown improved health outcomes, with one study showing a 60% reduction in falls.⁷ Team-based care training programs like TeamSTEPPS are complimentary to a variety of patient safety, quality improvement and high reliability programs. Learn more about AHA Team Training [here](#).

Patient Experience

Team-based care is designed to meet patient needs and preferences. Engaging patients as full participants in their care while surrounding them with the appropriate resources to meet their needs will improve patient satisfaction. Research has shown that patients who think their care team works well together often perceive their care to be a higher quality.⁸

Hospitals can conduct surveys, focus groups and interviews with patients to better understand their experience in the hospital and identify the components of care that matter most to their patients. They should then align their team-based care strategy to meet those needs. Hospitals

can measure improvement by tracking patient experience metrics before and after implementing team-based care through HCAHP scores or patient surveys.

Below is an example of a hospital that has seen how team-based care improved the satisfaction of their patients.

Montefiore Health System in New York utilizes an integrated team of primary care providers and behavioral health specialists to better serve its large population of low-income and minority patients with significant medical and mental health comorbidity and socioeconomic challenges. Through an app, a case manager can keep in touch with patients when they are out of the hospital and check in on their health. The case manager connects back to the care team, to ensure they know how the patient's situation is evolving. Patients liked being more connected to their care team and felt it helped them meet their health goals. In fact, 72% of patients reported feeling more connected to the care team and expressed overall satisfaction with their care.

Cost

Team-based care can help avoid unnecessary medical care or the exacerbation of illnesses, resulting in reduced costs for patients and hospitals. Evidence shows that optimizing team-based care is a cost effective intervention; not only is it cost effective for managing some chronic



diseases⁹, it has been shown to prevent ED visits for patients with cancer¹⁰.

Hospitals can consider measuring their savings from avoidable readmissions or decreased ED utilization as a result of implementing team-based care. For patients, hospitals can demonstrate the health care costs they were able to avoid as a result of better coordinated and managed care.

These hospitals have been able to demonstrate the positive financial impact of their team-based care models.

Utah-based **Intermountain Healthcare's Mental Health Integration** model leverages a team-based approach to integrate behavioral health into every patient visit. During primary care visits, patients' behavioral health needs are assessed and stratified by complexity. In addition to the primary care clinicians, the customized care team may include social workers, therapists, psychiatrists, care guides, care advocates, care managers, physical therapists, nutritionists, pharmacists and peer mentors. Following the initial visit, a team develops an individualized care plan that supports treatment for the patient and family. Through implementing team-based care, Intermountain has saved \$13 million per year, primarily through reduced unnecessary utilization of the ED and hospital visits.

At **Columbus Community Hospital** in rural Nebraska, interdisciplinary care teams huddle twice per day to discuss the needs and progress of each patient, planning their care after discharge while patients are still at the hospital. The teams conduct risk assessments to identify patients more likely to be readmitted, such as those with a history of frequent ED visits or comorbidities. Teams include three registered nurse case managers, hospitalists, social workers, pharmacists, nurses and clinical therapist. The hospital also strengthened its communication and care plans with providers outside of the hospital – including staff at skilled nursing facilities, home health agencies, assisted living facilities, retail pharmacies and medical groups. As a result of these actions, CCH reduced



readmissions by 42% and saved \$819,797 in just 18 months.

Team-based Care during COVID-19

The COVID-19 pandemic is highlighting the importance of interdisciplinary care teams. Team-based care both enables clinicians to respond to patient needs and increasing volume, and to support one another.

Patient Care. Team-based care lays the foundation for care teams to be more nimble and adjust and evolve to meet the changing needs of their patients. A team of several staff members led by a critical care expert can oversee a group of patients and support the rest of the team in providing high-quality care.¹¹

Staff Support. COVID-19 has been a significant strain on health care providers, creating stress, anxiety and fear for many. Team members can support each other's physical and emotional health by allowing them coverage to take breaks and mutually supporting one another.¹²

AHA's new video series, *TeamSTEPPS for the COVID-19 Crisis*, features TeamSTEPPS tools designed to optimize teamwork and communication, two skill sets that are especially needed during the pandemic. Each video focuses on how different TeamSTEPPS tools can be used in COVID-19 scenarios.

Conclusion

Assembling a team of health care providers from diverse professional backgrounds has the power to improve value for hospitals and for patients. By working together and leveraging the unique skills and expertise of all team members, hospitals can make progress on their journey to provide the best possible care for the patients and communities they serve.

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