High Performing Interdisciplinary Teams

Jeff Capobianco, PhD, LLP
The National Council

Presentation Overview

1. Defining Our Terms…What is a team?
2. The Impact of Teamwork on Health Outcomes.
3. Creating a Powerful Team…What works?
4. Resources
5. Questions & Answers.
“Team” & “Teamwork” means something different to everyone...

A Continuum of Healthcare Teams

- **Multi-disciplinary Team** = hierarchical, each role separate, some communication, parallel processes.

- **Inter-disciplinary Team** = interdependent, maintain distinct professional responsibilities & assignments, must make dramatic adjustments in their orientation to co-workers.

- **Trans-disciplinary Team** = shared decision making, every member can do everyone else’s role if needed, one process, much communication.

Source: Cooper et al. (2003). The Interdisciplinary team in the management of chronic condition: Has its time come? RWJF.
The Interdisciplinary Team:

People with distinct disciplinary training working together for a common purpose, as they make different, complementary contributions to patient-focused care.


Adaptive Reserve

• Borrill et al. (2000) found that teams with greater occupational diversity reported higher overall effectiveness and the innovations introduced by these teams were more radical and had significantly more impact both on the organization and on patient care.

2007 Cochrane Review of “Shared Care”

“Results from a few of the studies suggested that shared care may be more effective in certain patient groups. These include patients with depression and other serious chronic mental health illness and those with high levels of morbidity at baseline such as the elderly and people with moderate to severe congestive cardiac failure.”

Source: Effectiveness of shared care across the interface between primary and specialty care in chronic disease management (Review) 13 Copyright © 2007 The Cochrane Collaboration, JohnWiley & Sons, Ltd

Health Outcomes Related to Interdisciplinary Teams

A study involving >5,000 patients in 13 ICU’s found significant patient mortality reductions in hospitals where interdisciplinary teams worked in close collaboration.

Health Outcomes Related to Interdisciplinary Teams

Interdisciplinary teamwork correlated to lower hospital readmission rates the greatest reductions in readmission rates occurred when physicians, nurses, and social workers were most satisfied with their professional relationships on the team.


The Team as an Emerging Standard of Care

“The high-performing team is now widely recognized as an essential tool for constructing a more patient-centered, coordinated, and effective health care delivery system.”

Five Components of Effective Interdisciplinary Teams:

1. Defining appropriate team goals.
2. Clear role expectations for team members.
3. A flexible decision-making process.
4. The establishment of open communication patterns.
5. The ability of the team to “treat” itself.


Defining appropriate team goals

- Develop a team dashboard that includes measurable, and meaningful/relevant goals.
- The goals must relate to tx plan, staff work plan & broader organizational goals.
- Tie the goals to a quality improvement/PDSA process.
- Incorporate discussion of the goals/measures into every meeting.
Clear role expectations for team members

- The more complex the task the clearer roles must be.
- All team members have their own opinions of what their role is and what their team member’s role is…
- If suspected or seen role ambiguity & conflict should be discussed right away.
- Routinely, clearly state who “owns” or is “responsible” for a task to help foster this thinking.
A flexible decision-making process

• A team is a problem-solving, decision-making mechanism. This is not to imply that an entire group must always make all decisions as a group.

• The issue is one of relevance and appropriateness; who has the relevant information and who will have to implement the decision.

A flexible decision-making process cont.

• Similarly, when a group faces a conflict it can choose to (a) ignore it, (b) smooth over it, (c) allow one person to force a decision, (d) create a compromise, or (e) confront all the realities of the conflict (facts & feelings) and attempt to develop an innovative solution.

• The choices individual team members and the team as a whole make will significantly influence how the team functions.
The establishment of open communication patterns

- Create avenues for communication (e.g., logs, regular team meetings, use of common language, etc.).
- Maintain regular contact with agency leadership.
- Understand how culture & training drives language and communication styles.
- Maintain regular one-on-one supervision.

What Staff Care About/ Want from a Leader

Practical Questions
- What do you want me to keep doing?
- What do you want me to stop doing?
- What do you want me to do differently?

Personal Questions
- Is my job fulfilling my passion/life vision?
- Is my job fulfilling my career goals?
The ability of the team to “treat” itself

• Include a “Team self-audit” process that is tied to the team’s dashboard.
• Encourage questioning & the voicing of alternative views.
• Declare team breakthroughs & team breakdowns when necessary.
• Encourage necessary acts of leadership.

Team Norms…

• Norms take on particular potency because they influence all of the other areas previously discussed.
• Groups develop norms governing leadership, influence, communication patterns, decision-making, conflict resolution, and the like. Inherently, norms are not good or bad.
• The issue is one of appropriateness — Does a particular norm help or hinder a group's ability to work?
Team Value Systems…

- Wilmot (1995) reported that nurses valued individualism, caring, autonomy, holism & patient well-being, while social workers internalized collectivity, liberty, equality & justice.

- Family practice and internal medicine medical students and residents were found to be least inclined to interdisciplinary practice while social workers were most inclined.


Take Care of Your Team…

- “Transformation occurs, not at a steady & predictable pace, but in fits & starts. After the strenuous task of implementing a particular PCMH component, the practice had to simultaneously manage the ripple effects, maintain the change, & prepare for the next…”

- “…the work is daunting, exhausting & occurring in practices that already felt as if they were running as fast as they could. This type of transformative change, if done too fast, can damage practices and often result in staff burnout, turnover, & financial distress.”

Team Care

- Recognize teams are dynamic, emotion laden, and need constant attention and reassurance.
- Hardwire rewards into the work flows.
- Be careful to hire team members not positions.
- Get in the habit of monitoring and responding to changes in morale/trust.

AHRQ TeamSTEPPS

Who? AHRQ & Dept of Defense
What? Evidence-based teamwork system
When? Implemented in 2005
Where? 6 regional training centers
Why? Optimize patient outcomes
How? Improve communication & teamwork skills
4 teamwork skills, 3 teamwork outcomes

Team Tools/Scales

- **ATHCT Scale**: Attitudes Toward Health Care Teams Scale
- **Team Skills Scale (TSS)**: a self-assessment instrument
- **Inter-professional Collaboration Scale (IPC)**: Team function from individual team members’ perspective specifically, effectiveness of communication, accommodation and appearance of isolation
- **Primary Health Care Team Effectiveness Survey**
Other Sources


Thank You!

• Ideas for Discussion?

• Questions?