

NATIONAL COUNCIL
FOR BEHAVIORAL HEALTH



Team-based Care ECHO

— Session 8 —

Wednesday, March 31, 2021
12:00pm-1:00pm ET



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Center of Excellence for Integrated Health Solutions

Funded by Substance Abuse and Mental Health Services Administration
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Disclaimer

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Introductions



Jeff Capobianco, PhD, LLP
Integrated Health Sr.
Consultant, National
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John Bischof, MD
Medical Director,
Behavioral Health,
Care Oregon



Angela Pinheiro, MD
Medical Director,
Community Mental
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Strategies for Providing Training, Support, and Care of the Team

Presenter: John Bischof, MD



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Implementation and On-going: Essentials

- **Fundamentals of TBC**—the why, what, and how
 - **Care pathways and workflows**—with continuous fidelity checks
 - **“Primary care 101”**—with annual update
 - **CQI**—concepts and relevance to the work
 - **Morale and Team Identity/Cohesion**—(arguably) the highest priority for support and care; requires:
 - Leadership
 - Communication
 - Follow-through
- All these efforts require *continuous attention and diligence*



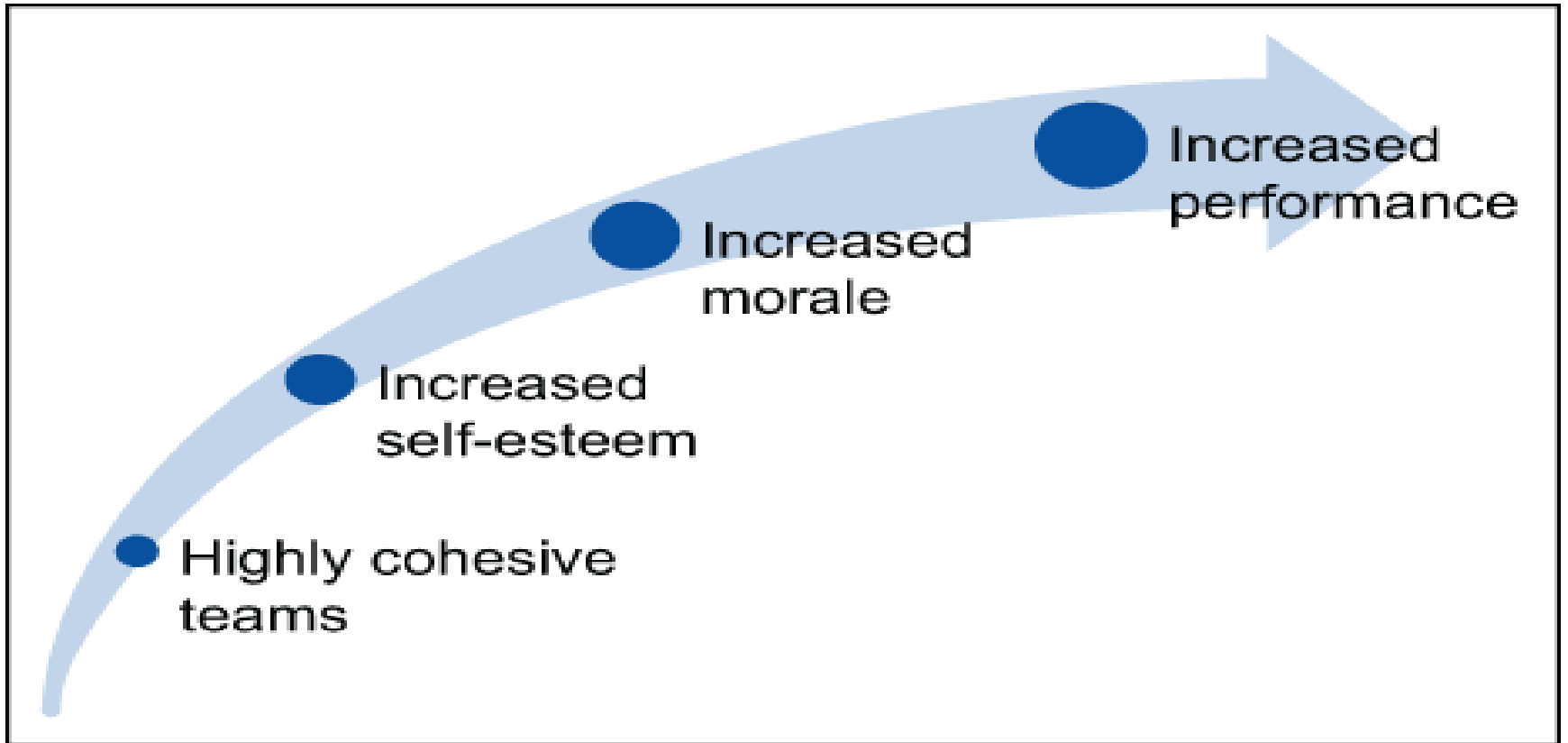
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Cohesiveness to Performance*



*<https://www.isixsigma.com/implementation/teams/high-performance-teams-understanding-team-cohesiveness/>



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Trainings and Resources

- [Cambridge Health Alliance Model of Team-based Care Implementation Guide and Toolkit \(Cambridge Health Alliance\)](#)
- [Center of Excellence for Integrated Health Solutions Training and Technical Assistance \(National Council\)](#)
- [Creating Patient-centered Team-based Primary Care \(AHRQ, 2016\)](#)
- [Team-Based Care and Workflow](#)
- [Team-Based Care Quality Improvement Resources](#)
- [TeamSTEPPS Pocket Guide 2.0](#)



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Case Scenarios for Team Support and Care

Presenter: Jeff Capobianco, PhD, LLP



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Case Scenarios for Team Support & Care

- **Leadership**
- **Communication**
- **Follow-through**



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Leadership

Confusion/hesitancy

“Why are we do these huddles when our monthly meeting was enough...I am able to connect with my colleagues when I need to?”

Possible Solutions

- Making sure staff help design the protocols and can clearly link the protocol to their care pathway workflows
- Clear and consistent messaging of the end goal/purpose of the huddle otherwise staff may see it as a solution for a problem they don't have...
- Measurable outcomes associated with the process...having the team rate if the huddle design/frequency is adequate/useful during the implementation PDSA
- Other ideas?!



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Communication

Confusion/Hesitancy

Following huddles or interactions between staff during care coordination follow-through is not completed or information is not clearly conveyed or acted on.

Possible Solutions

- Huddle Report-out/Alerts: Situation, Background, Assessment & Recommendation/Request (SBAR)
- Care Coordination/Transitions “I PASS THE BATON”
- Other ideas?!



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SBAR

Situation – What is going on with the patient?

“I am calling about Mrs. Joseph in room 251. Chief complaint is shortness of breath of new onset.”

Background – What is the clinical background or context?

“Patient is a 62-year-old female post-op day one from abdominal surgery. No prior history of cardiac or lung disease.”

Assessment – What do I think the problem is?

“Breath sounds are decreased on the right side with acknowledgment of pain. Would like to rule out pneumothorax.”

Recommendation and Request – What would I do to correct it?

“I feel strongly the patient should be assessed now. Can you come to room 251 now?”

I PASS the BATON

I	Introduction	Introduce yourself and your role/job (include patient)
P	Patient	Name, identifiers, age, sex, location
A	Assessment	Present chief complaint, vital signs, symptoms, and diagnoses
S	Situation	Current status/circumstances, including code status, level of (un)certainty, recent changes, and response to treatment
S	Safety Concerns	Critical lab values/reports, socioeconomic factors, allergies, and alerts (falls, isolation, etc.)
THE		
B	Background	Comorbidities, previous episodes, current medications, and family history
A	Actions	Explain what actions were taken or are required. Provide rationale.
T	Timing	Level of urgency and explicit timing and prioritization of actions
O	Ownership	Identify who is responsible (person/team), including patient/family members
N	Next	What will happen next? Anticipated changes? What is the plan? Are there contingency plans?

Follow-Through

Confusion-Hesitancy

“Lack of progress on Administrative (e.g., no-show, up-to-date chart, productivity, etc.) and Clinical Targets (e.g., Social Determinant, Mental Illness and/or Physical Health Targets).”

Possible Solutions

- Routinely reviewing the process/outcome measures and the targets benchmarks/cutoffs
- Mapping Care Pathway workflow steps and identifying areas of disconnect for improvement with a PDSA cycle
- Celebrating improvements and sharing the data/targets with clients
- Other ideas!?



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Poll #1 - What is an area of focus for improvement in your organization?

- Leadership
- Communication
- Follow-Through
- Other: please write in chat!



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Open Discussion



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Submit your case presentation today!

- If you are interested in submitting a case to present during a session, download and complete this [template form linked here](#) and submit to RaymondaT@thenationalcouncil.org.
- Please make sure to indicate which session you would like to present on.

The image shows two side-by-side screenshots of a web-based form titled "Team-based Care ECHO Case Presentation Form". The form is from the Center of Excellence for Integrated Health Solutions (CoE) and The National Council for Behavioral Health. It features the ECHO logo at the top. The form includes fields for "Presenter Name" and "Organization", a thank-you message, and five numbered questions. Questions 1, 2, 4, and 5 have large empty boxes for answers. Question 3 is a short-answer question. The footer of the form includes the CoE logo and text: "Funded by Substance Abuse and Mental Health Services Administration" and "Operated by The National Council for Behavioral Health".



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Upcoming CoE events:

NatCon21

[Register here](#) on May 3-5, 2021

CoE webinar: Why and How Peer Services Improve Health and Wellness of People with Mental Illness

[Register here for Webinar](#) on April 13, 2-3pm ET

Looking for free trainings and credits?

[Check out integrated health trainings from Relias here.](#)

Interested in an individual consultation with the CoE experts on integrated care?

[Contact us through this form here!](#)



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Thank You

Questions?

Email RaymondaT@thenationalcouncil.org

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1-877-SAMHSA-7 (1-877-726-4727) 1-800-487-4889 (TDD)



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