

3-23-2017

## Transitioning to Team-Based Primary Care

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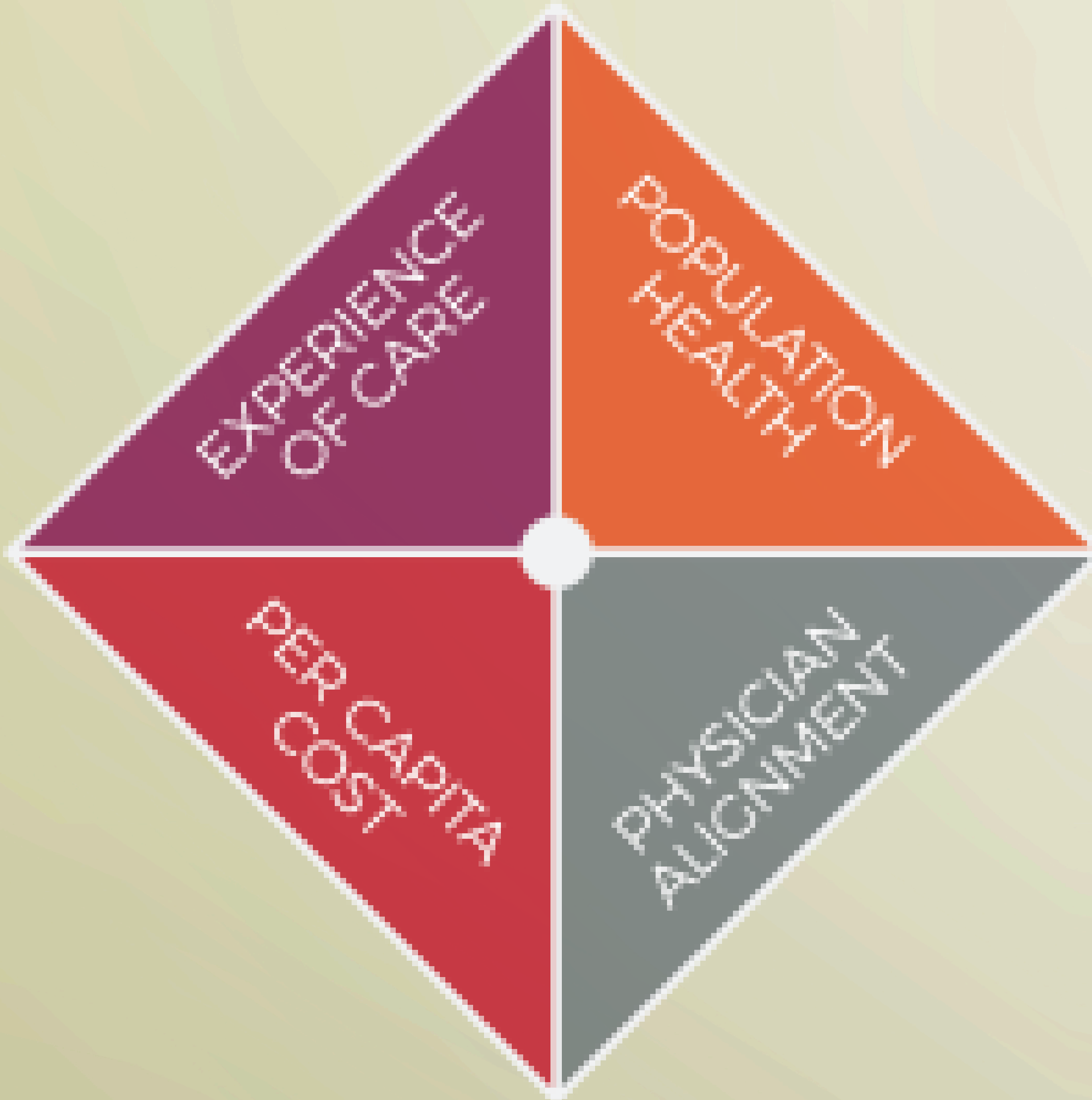
### Citation

Karim, Hanna and Di Capua, Paul, "Transitioning to Team-Based Primary Care" (2017). *All Publications*. 2652.  
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## Introduction

Primary care can address the “Triple Aim,” by reducing costs, improving quality, and addressing population health. However, the ability of primary care to deliver on the triple aim is dependent on a fourth aim that is not usually considered. This is the ability of frontline health professionals and doctors to work fluently in high functioning teams. With this in mind, designers know that intricacies within the health system render challenges to management. Our intervention attempts to facilitate the cultural transformation of a primary care practice to be centered on team-based care.



## Methods

A previously validated survey to measure team-based care in primary care practices was given to staff at the Family Medicine Center.<sup>1</sup> In collaboration with administration, Family Medicine Center started bi-monthly meetings centered around improving team-based care with facilitated discussions and interventions as well as liberating structures geared towards bottom-up innovation and leadership. At the end of the intervention, the survey will be redeployed to assess changes in *team-ness* at the Family Medicine Center over the time of the intervention.

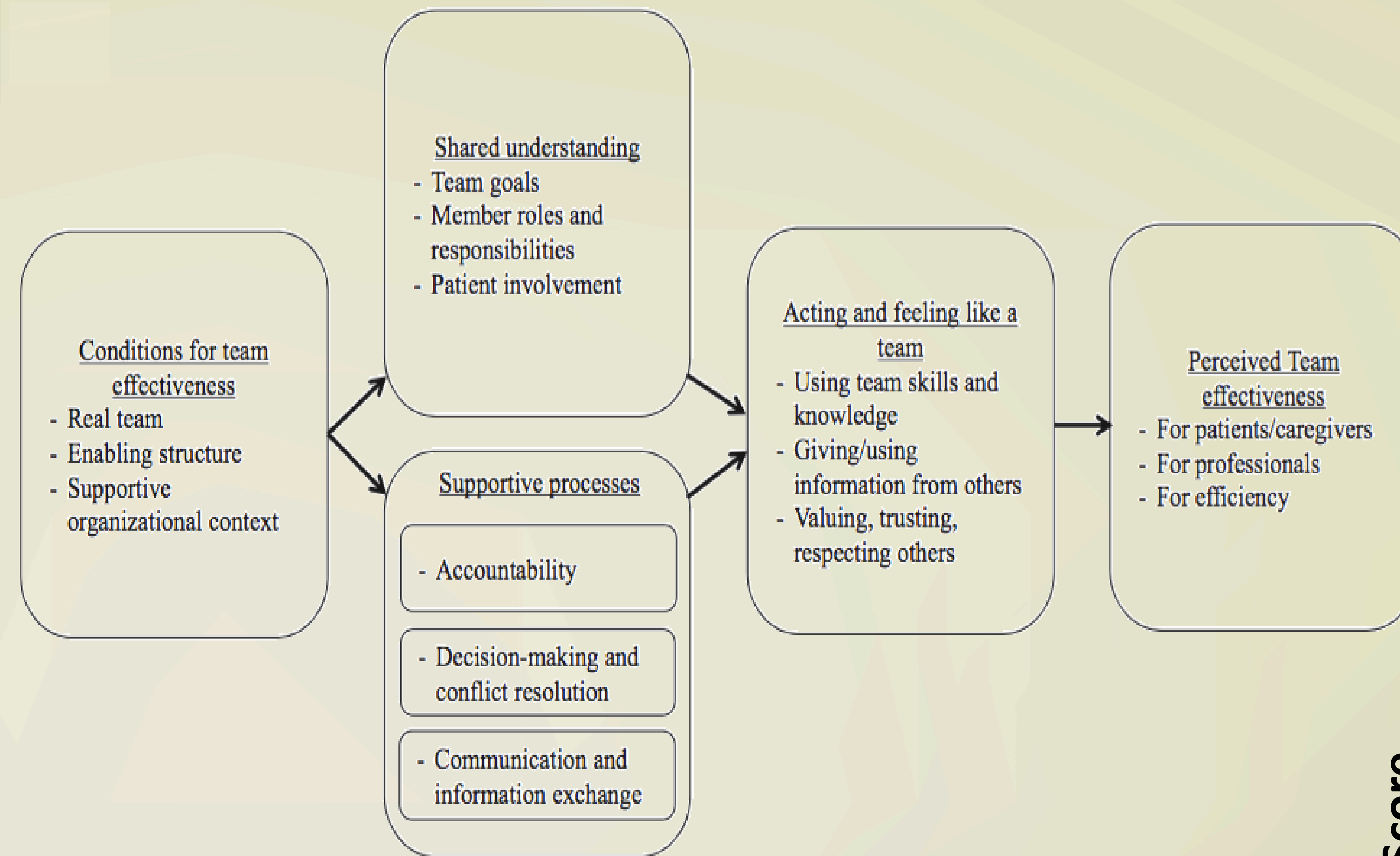


Figure 1: Dimensions of team based care<sup>1</sup>

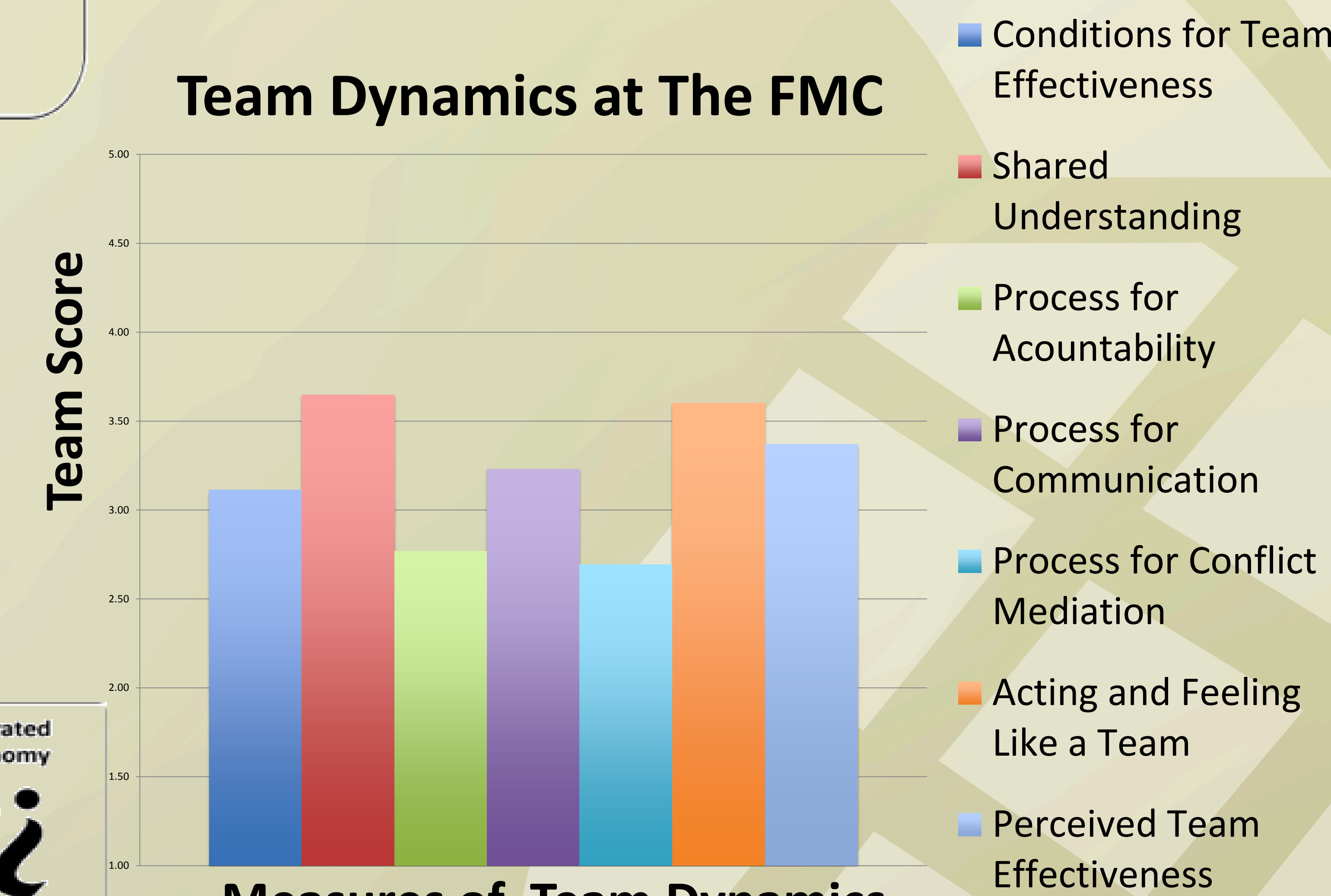
LS Menu 	Wicked questions 	What? debrief 	Min specs 	Heard, seen respected 	What I need from you 	Integrated autonomy 
Design elements 	Appreciative interviews 	Discovery and action dialog 	Improv prototyping 	Drawing together 	Open space 	Critical uncertainties 
1-2-4-All 	TRIZ 	Shift & share 	Helping heuristics 	Design storyboards 	Generative relationships 	Ecocycle 
Impromptu networking 	15% solutions 	25 : 10 crowdsourcing 	Conversation café 	Celebrity interview 	Agree/certainty matrix 	Panarchy 
9-whys 	Troika consulting 	Wise crowds 	User experience fishbowl 	Social network webbing 	Simple ethnography 	Purpose to practice 

Figure 3: Examples of liberating structures

## Results

Response rate for survey was 86.7% (respondents/total). Respondents consisted of 4 medical assistants, 4 physicians, 1 nurse practitioner, and 4 front desk personnel. The average team score based on our survey was 3.38 on a scale of 1-5. For specific dimensions like process accountability, conflict mediation, and ‘feeling’ like a team the scores were 2.77, 2.69, and 3.60, respectively.

### Team Dynamics at The FMC



Measures of Team Dynamics

Figure 2: Baseline data of FMC staff from survey on team dynamics

## Discussion

Primary care has been thought to be critical for health systems to achieve quadruple aim. We investigated the effect of bi-monthly meetings and liberating structures on the effect of team dynamics. Baseline data from our survey suggests that the staff believe they are moderately proficient in working as a team. At the conclusion of the intervention we hope to see improvement in the team dynamics of the Family Medicine Center personnel

## References

1. Song H, Chien AT, Fisher J, et al. Development and validation of the primary care team dynamics survey. Health Serv Res. 2015;50(3):897-921.