From Soloist to Symphony: Healthcare Team Formation

Glen I. Komatsu, MD

Regional Chief Medical Officer

Providence Health & Services California

Chief Medical Officer

TrinityCare Hospice

Medical Director, TrinityKids Care

Director, Doak Center for Palliative Care

Providence Little Company of Mary Medical Center Torrance, CA

Rev. Denise Hess, BCC-HPCC, MFTI

Palliative Care Chaplain & Marriage and Family Therapist Intern

Providence Little Company of Mary Medical Center Torrance, CA

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Dr. Glen Komatsu and Denise Hess have disclosed no relevant financial relationships.

Palliative Care

The Challenge

Making systems work is the great task of my generation of physicians and scientists. But I would go further and say that making systems work — whether in healthcare, education, climate change, making a pathway out of poverty — is the great task of our generation as a whole.

Atul Gawande, TED 2012

From Cowboys to Pit Crews

Making systems work in healthcare—shifting from corralling cowboys to producing pit crews—is the great task of your and my generation of clinicians and scientists...include[s] teamwork, the recognition that others can save you from failure no matter who they are in the hierarchy.

Atul Gawande

Commencement address to the 2011 Harvard Medical School

http://www.newyorker.com/news/news-desk/cowboys-and-pit-crews

Providence Palliative Care

Our Mission

As people of Providence, we reveal God's love for all, especially the poor and vulnerable, through our compassionate service.

Together, we answer the call of every person we serve: Know me, care for me, ease my way.

Palliative Care

PROVIDENCE
Health & Services

Gap Analysis

A design team of Palliative Care practitioners, educators and stakeholders identified the critical workforce issues and performance gaps impacting palliative care specialty teams:

- Interdisciplinary team functioning
- Lack of external training opportunities focused on interdisciplinary palliative care competency areas
- Burnout and compassion fatigue

Competencies/Methodology

- Competency areas
  - Interdisciplinary collaboration
  - Self-reflection and self-care
  - Compassionate communication

- Five day, intensive, residential, team formation process

Implementation

- The pilot training was offered to 3 intact and mature Providence palliative care teams from Spokane, Olympia and Anchorage

- Each attending team included: MD, RN, SW and Chaplain

- Faculty were chosen based on clinical experience and attendance at the Harvard Palliative Care Education and Practice (PCEP) program

- Didactic material developed by the presenters

Objective 1

- ***Utilize the concept of spiritual formation to enhance team development, identity, function and flourishing***
  - **Includes**:
    - Theory and methodology for a spiritual formation process as an educational strategy
    - Concepts of whole person care including
      - Curing versus healing
      - Suffering and the wounded healer
    - Creation of a team formation experience
  - **Teaching method**: Interactive didactic presentation, experiential practice in reflective journaling activities

Healing/Wounding Exercise

- How did a patient/family contribute to your wounding?

- How did you wound a patient/family?

- How did you contribute to the healing of a patient/family?

- How did a patient/family contribute to your healing?

Objective 2

- ***Establish goals and strategies for greater mindfulness, resiliency, and team learning to enhance team formation***
  - **Includes**
    - Theory and practice of whole person care teams
    - Current assumptions and myths about team care
    - Mindfulness practice
    - Reflective journaling activities
  - **Teaching Method**: Interactive didactic presentation, experiential practice

Mindfulness

Attention to and awareness of what is occurring in the present moment in:

Context

Self

Other
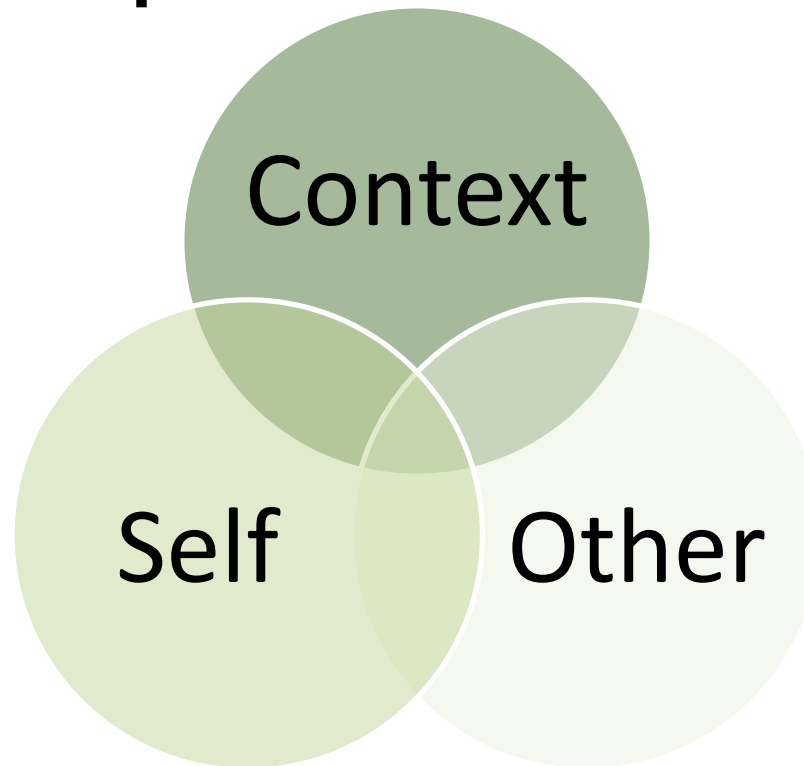
with a stance of open, non-judgmental curiosity

Objective 3

- *Improve patient and family care, and provider well-being through whole person team care practice*
  - **Includes**
    - Simulated family conference role-play
    - Team narrative development
    - Post-formation assessment
  - **Teaching Method**: Interactive didactic presentation, experiential practice, video demonstration, PowerPoint review of data

Team Narratives

Team Narrative

- What is your proposed team narrative?
- Why did you choose this narrative (rationale & value)?
- How would you develop & sustain narrative?
- What resources do you need for your team to flourish in the present, assuming limited resources and money?
  - Institutional
  - Regional
  - System
- Do you see value in a team narrative and how it would help your team's functioning and flourishing?

Pre-Training Team Assessment

- Pre-training team assessments were conducted to determine perceived areas of team strengths and weaknesses. Results of the 25 question survey reinforced the focus, training goals and objectives:

| Strengths of the team – top 4 ratings	Team areas needing the most improvement – bottom 4 ratings
• Team members respect each other • Team members take initiative to put forth ideas and concerns • Team members see participation as a responsibility • Each team member pulls his/her own weight	• Our roles are clearly defined and accepted as defined by all team members • If we were asked to list team priorities, our lists would be very similar • Our mandate, goals and objectives are clear and agreed upon • Team members have an equal voice

Post-Training Assessment

- **Level 1: Reaction and Satisfaction**
- **Level 2: Confidence and Commitment**
- **Level 3: Learning Outcome Achievement**

Post-Training Assessment

- **Reaction and Satisfaction**
  - Learners were asked to rate their satisfaction with the training on a 4-point Likert scale.
  - Questions focused on the relevance of the training for their daily job performance, the value of the time spent in training, and whether they would recommend this training to others.
  - Target score was 3

# Level 1: Reaction and Satisfaction
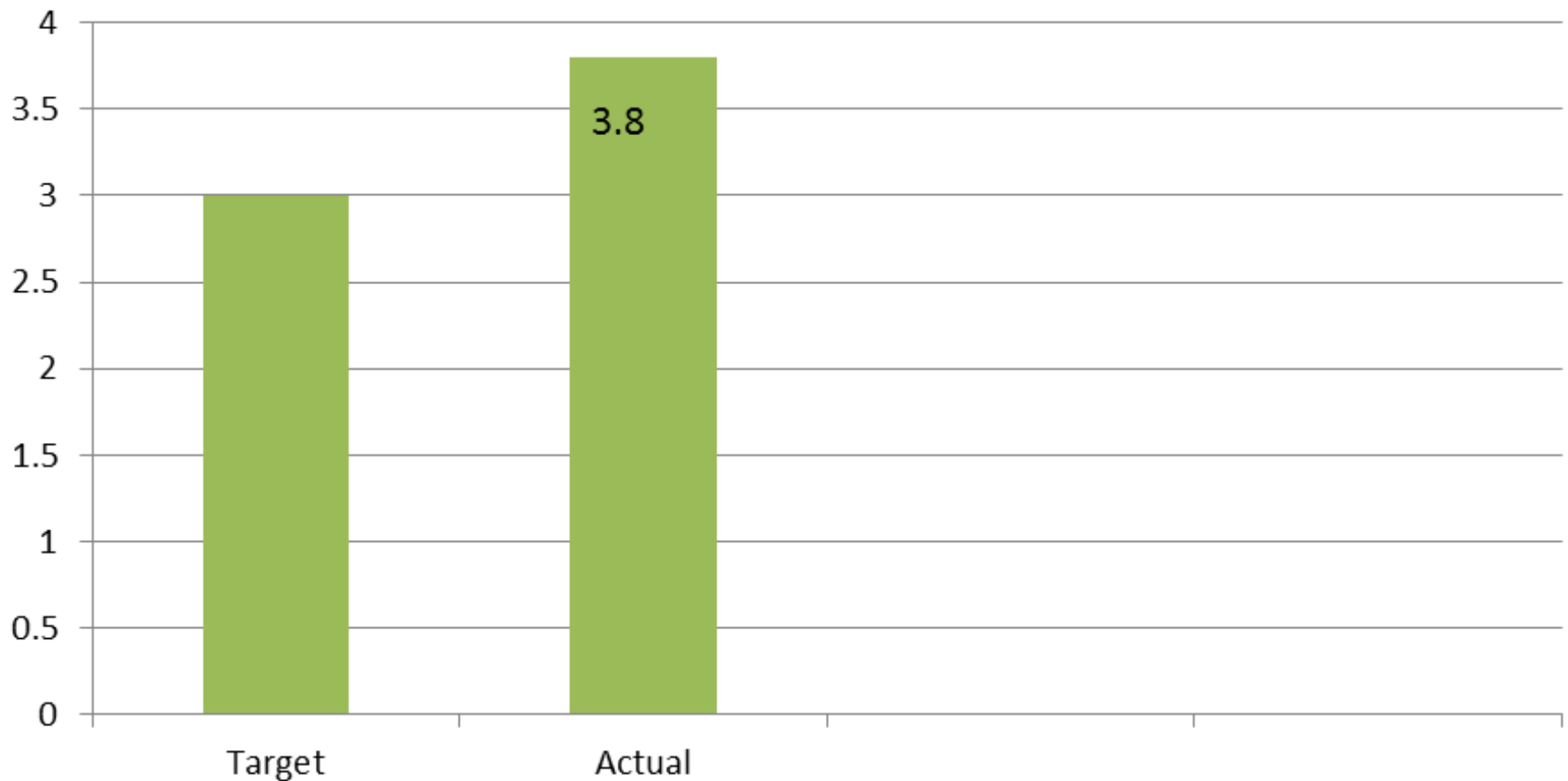
Post-Training Assessment

- **Confidence and Commitment**
  - Learners were asked to score their confidence levels in being equipped with the knowledge and skills needed to apply the learning to their job, and their overall commitment to applying the learning once they leave the training environment
  - Scoring was on a 10-point Likert scale.
  - Target score is 7 as this demonstrates realistic expectations

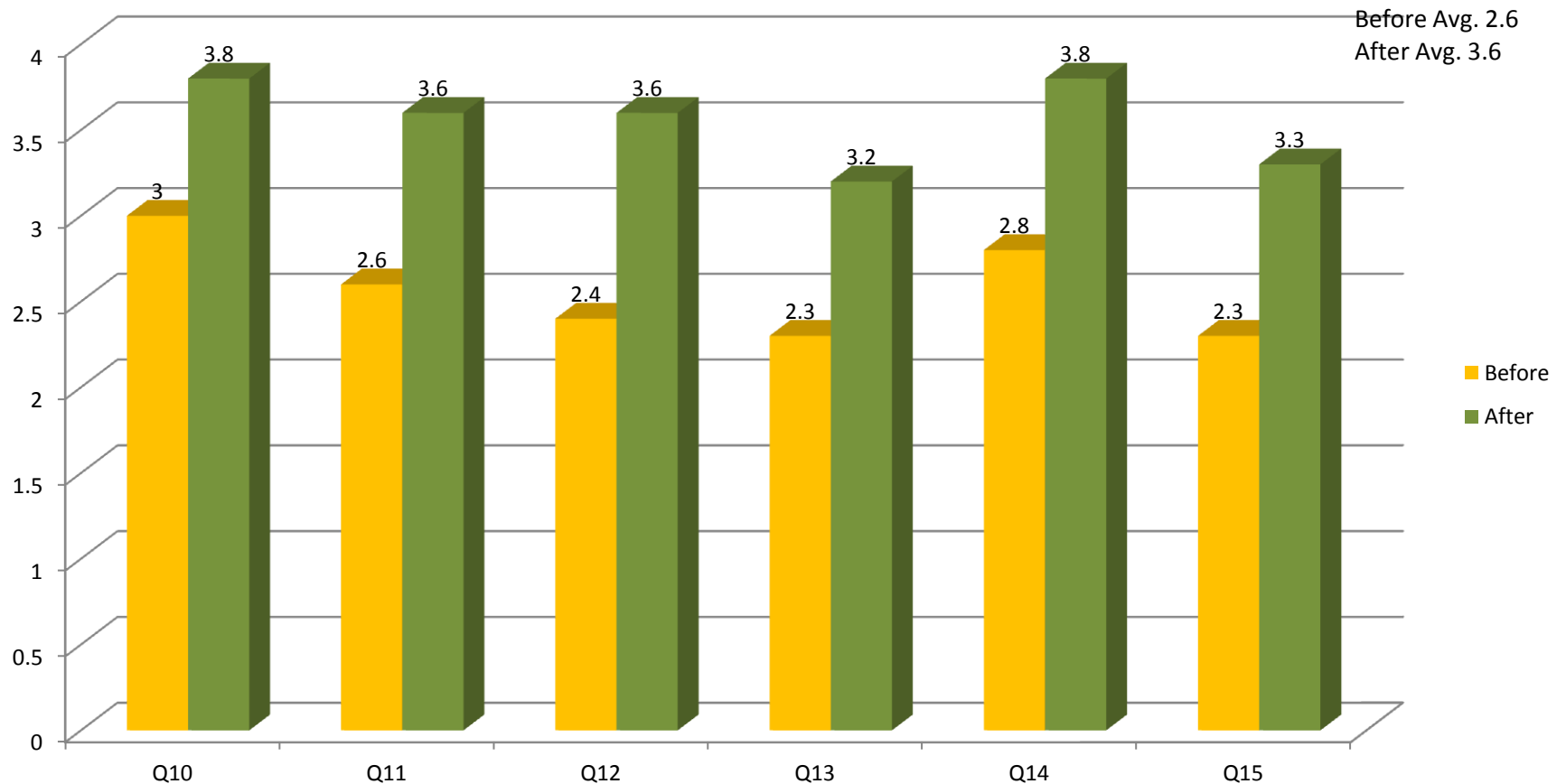# Level 2: Confidence and Commitment
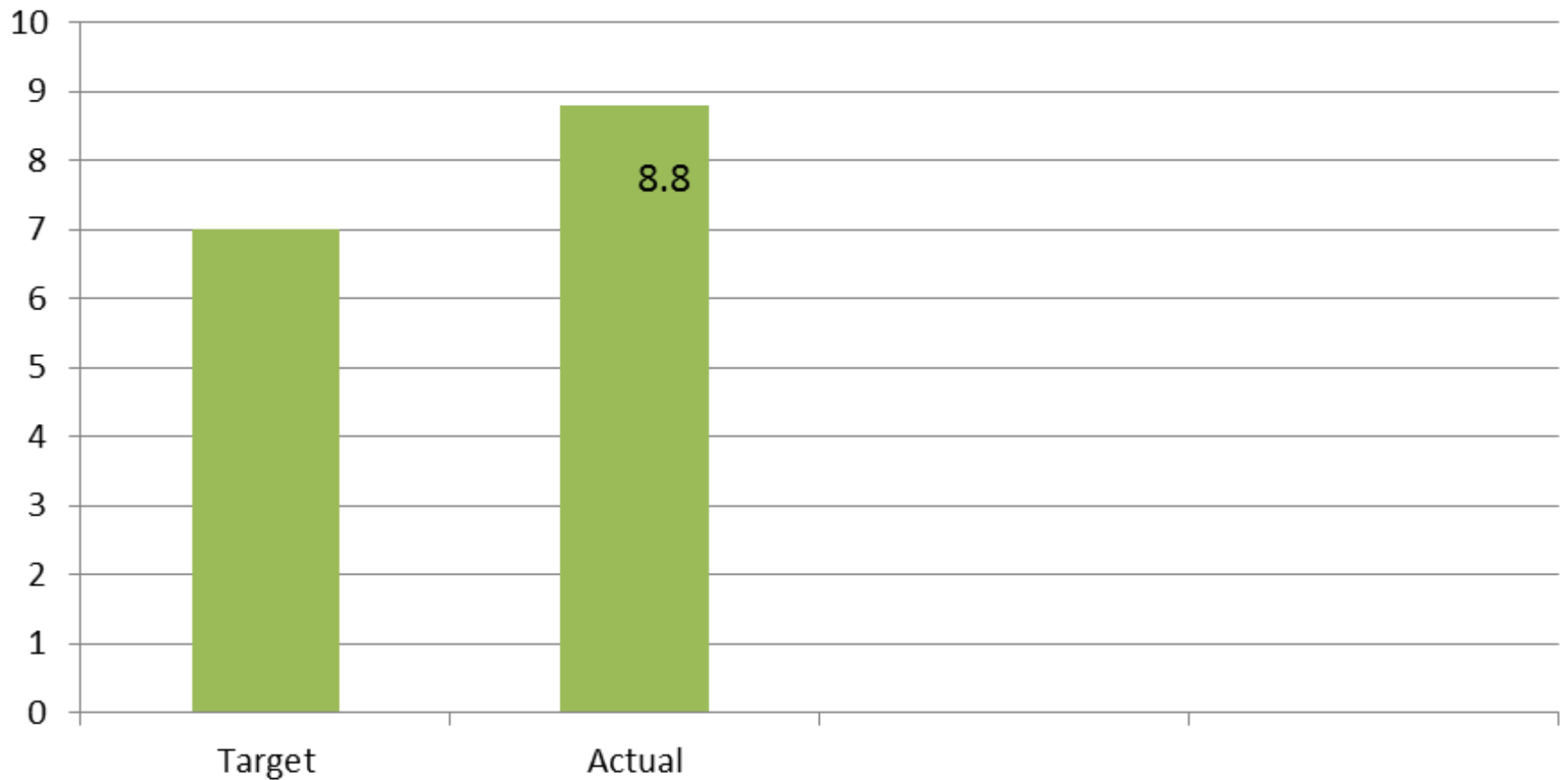
Level 3: Learning Outcome Achievement

- **Before and after learning outcomes**
  1. Using a whole person paradigm in my work with patients
  2. Using a whole person paradigm in my work with my team
  3. Using self-reflection and journaling as a tool to enhance practice
  4. Delivering candid feedback to my team members
  5. Establishing individual goals to improve my team functioning
  6. Establishing team goals to enhance team functioning

- Scoring was on a 4-point Likert scale

- Results indicate an increase in knowledge and skills after the 5-day residential training

Level 3: Learning Outcome Achievement

Palliative Care Training Evaluation Results:
Level 3 Questions Avg. Score Scale 4

Before Avg. 2.6
After Avg. 3.6

Legend:
- Before (yellow)
- After (green)

Data:
- Q10: Before 3, After 3.8
- Q11: Before 2.6, After 3.6
- Q12: Before 2.4, After 3.6
- Q13: Before 2.3, After 3.2
- Q14: Before 2.8, After 3.8
- Q15: Before 2.3, After 3.3

General Comments

- Renewing program – whole teams need to be able to attend
- Unlike anything I have ever done before. Very valuable to participate and see leadership role model these values
- Appreciate the support from leadership that gives me confidence that I will be supported
- Thank you! The ability of the facilitators to reach deep into our selves and expose/pull out/transform us safely and with tenderness is a very sweet thing. It hurt too – but in a good way.
- It was valuable to acknowledge the equal value of non-providers to do this work. It would help the esteem of this team if the MDs valued the non-providers
- Wonderful experience but still too physician centric
- We need better role clarification and job descriptions for the MSW and Chaplains on these teams

Limitations

- Long-term impact on individual and team functioning?
- Mitigation of burnout and compassion fatigue?
- Small sample size
- Scalability
- ROI?

Conclusions

- Spiritual formation is a valid educational process

- Team formation is key to team functioning and patient care

- The whole person care paradigm is a rich model for healthcare on every level

Formation participants and faculty

Question and Discussion