

Improving Patient Outcomes and Employee Well-Being with Team-Based Care

Background

In a previous external meta-analysis, we found that QI can worsen workforce well-being – likely due to the top-down governance of typical QI.(1)

Our aim is to explore whether a team-based strategy can improve patient outcomes and employee well-being simultaneously.

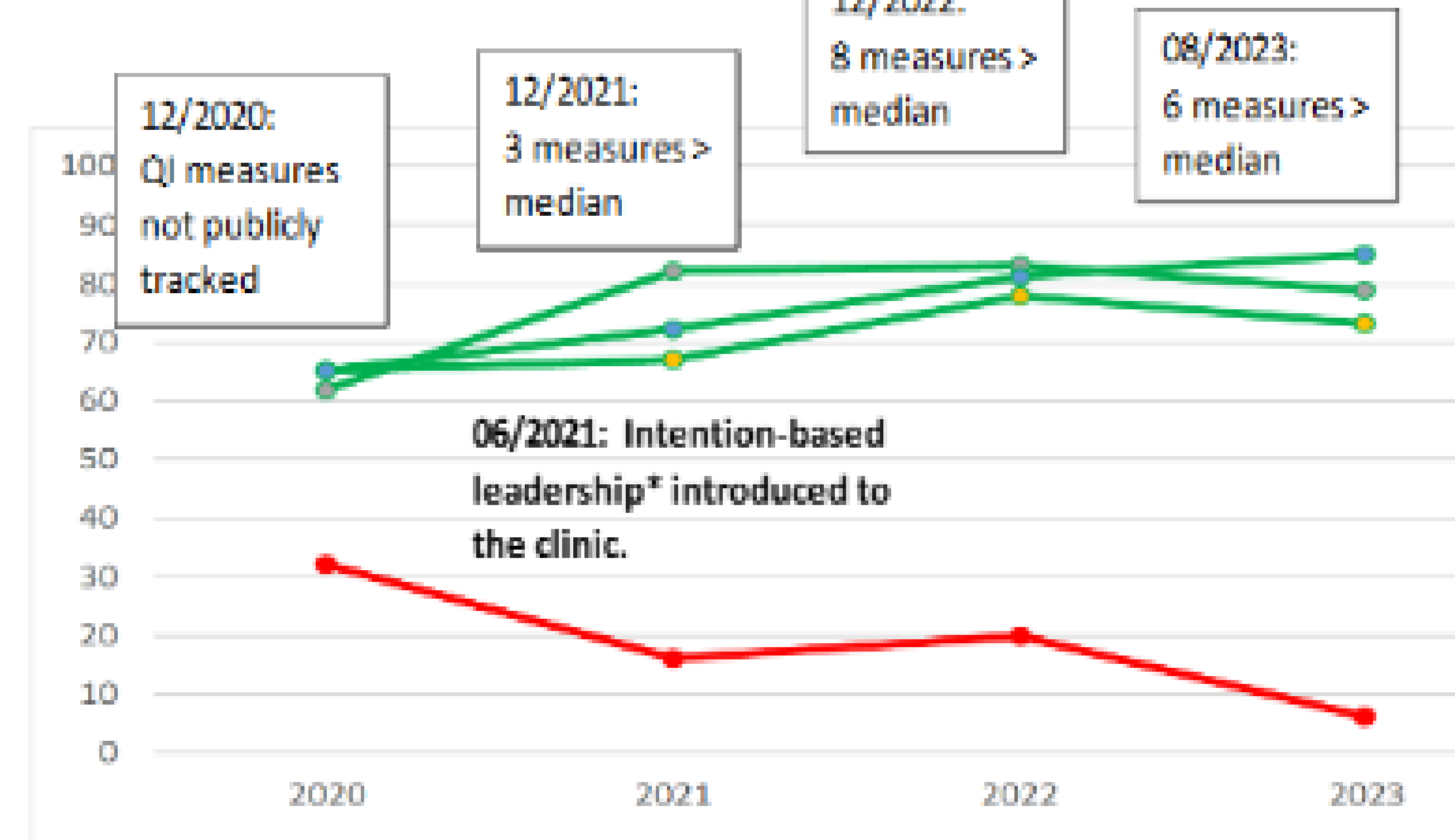
Project Design

- In 2021, 'intent based leadership' (2) was presented to clinical staff. As the theories were discussed, staff were encouraged to participate in quality improvement efforts to meet patient outcomes.
- 12 HEDIS measures were selected to focus on.
- A Process Review and Development meeting was established where clinical staff were on the front lines of decision making. We worked to develop strategies such as standing orders and pre-charting protocols. Specifically geared towards improving the selected measures.
- **Interventions:** staff developed processes such as prepping patients for foot exams prior to seeing a provider to ensure exam was completed, depression screenings were given by staff as indicated by CDSS and ready to be reviewed by the provider when they saw the patient, the clinic obtained a device to perform retinopathy screening exams by staff, and much more.

Results

Below is a summary of our changes in quality improvement in relation to burnout

Workforce Well-being and Number of Clinical QI measures over the national median at a university-affiliated teaching clinic



Green lines: three dimensions of engagement (vigor, dedication, and absorption)

Red line: burnout (measured by the Mini-Z)

Details of changes in QI benchmarks

Measure	2021	2022	2023	2024	Median
Controlling High Blood Pressure	67%	66%	66%	72%	64%
Statin Therapy for pts with CVD	98%	94%	94%	97%	83%
Foot Exam	0%	79%	54%	62%	86%
Eye Exam	6%	35%	29%	23%	90%
BP Control in DM (<140/90)	69%	76%	66%	72%	65%
HbA1c Poor Control (HbA1c > 9.0)	38%	21%	27%	31%	37%
Nephropathy Screening	81%	87%	82%	85%	84%
Breast Cancer Screening	37%	60%	53%	52%	56%
Cervical Cancer Screening	37%	18%	24%	26%	35%
Colorectal Cancer Screening	14%	48%	48%	47%	56%
Pneumonia Vaccine for Pts 65+	33%	64%	69%	71%	64%
Screening for Depression & F/U	60%	60%	58%	66%	74%

The Way A Project Can Work

- Engage the front line care team in goal-setting guided by local and national best practice benchmarks
- Monitor processes at various levels possible to break silos and create learning from one another
- Identify best practices from local "bright spots" and published experiences
- Get input from the front line to develop the easiest workflow
- Create informed discussion to share best practices and create a community guided by evidence
- Measure clinic personnel wellbeing before and after changes
- Measure front line perception of management (optional but encouraged)

Lessons Learned

- Through team-based leadership, engagement and self determination to meet benchmarks improved; creating a healthy working environment with autonomy that led to improved patient outcomes and employee satisfaction.
- Setbacks: There was direct correlation between quality outcomes and staff satisfaction when staffing was short or staff turnover was present.

Next Steps

- Accelerate innovation using AGILE or SCRUM QI strategies as opposed to the Waterfall technique to prevent bottlenecks in change.

Team Members

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References

1. Badgett RG, Duran BA. Does Participation in QI Affect Clinician Burnout? 2019 Annual Meeting of the Society of General Internal Medicine; 2019
2. Marquet LD. Turn the ship around! : a true story of turning followers into leaders. New York: Portfolio Penguin; 2015.

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