

**NURTURING  
COLLABORATION IN A  
LARGE GEOGRAPHICALLY  
DIVERSE FHT**

Thames  
Valley  
Family  
Health  
Team

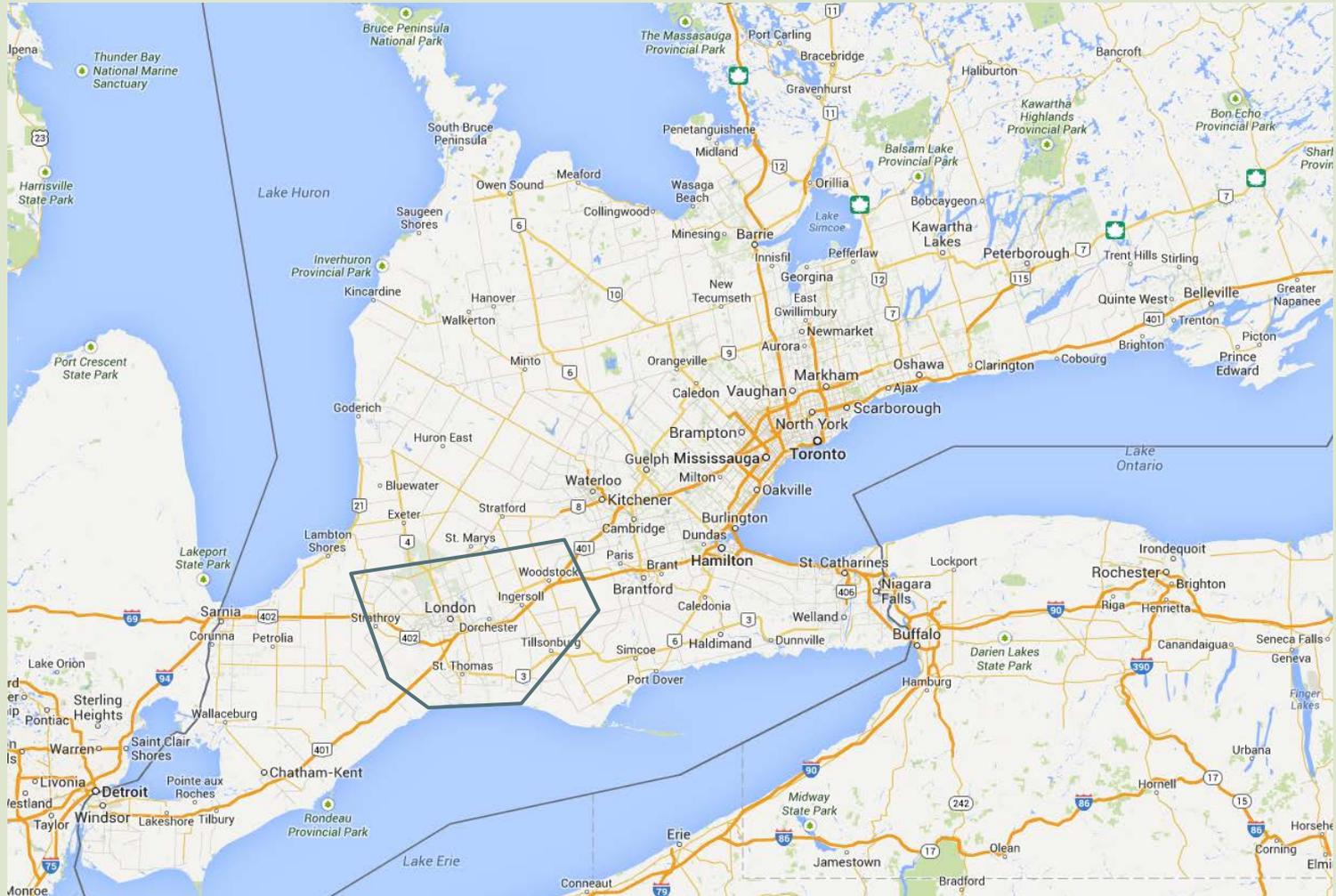
# OBJECTIVES

- Advantages and challenges associated with having a large, geographically diverse FHT.
- Strategies we use to support team development within and between sites.
- Current challenges, future directions.
- Learn from each other!

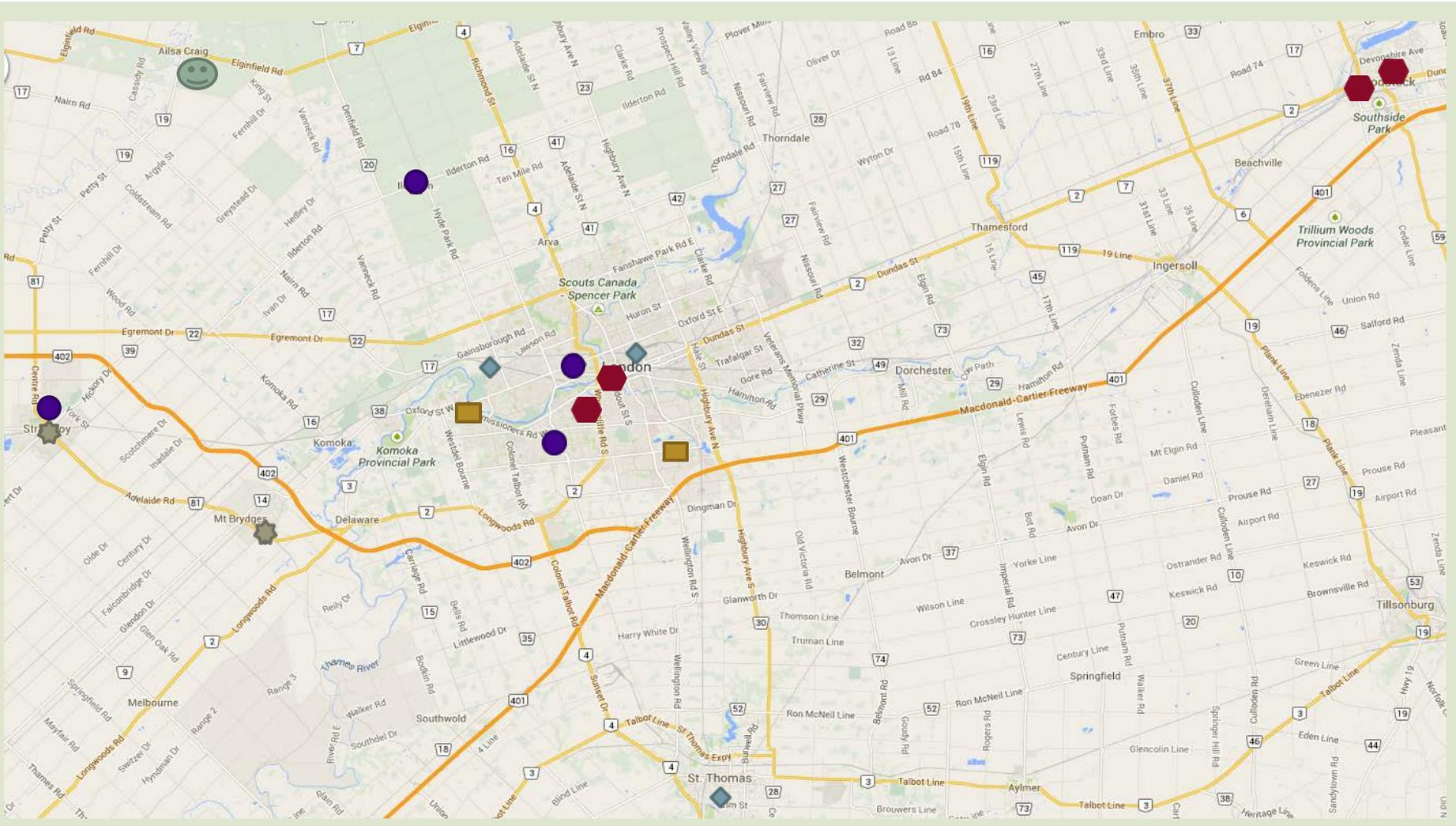
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# TVFHT - THE BACKGROUND



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# WHY!!!!

- Expected Advantages

- System
- Administrative Efficiency
- Be Heard (One Voice)
- Program Standardization

- Un-Expected / Additional Advantages

- Internal Networking Opportunities
- Physician Networking Opportunities
- Learning from Each Other

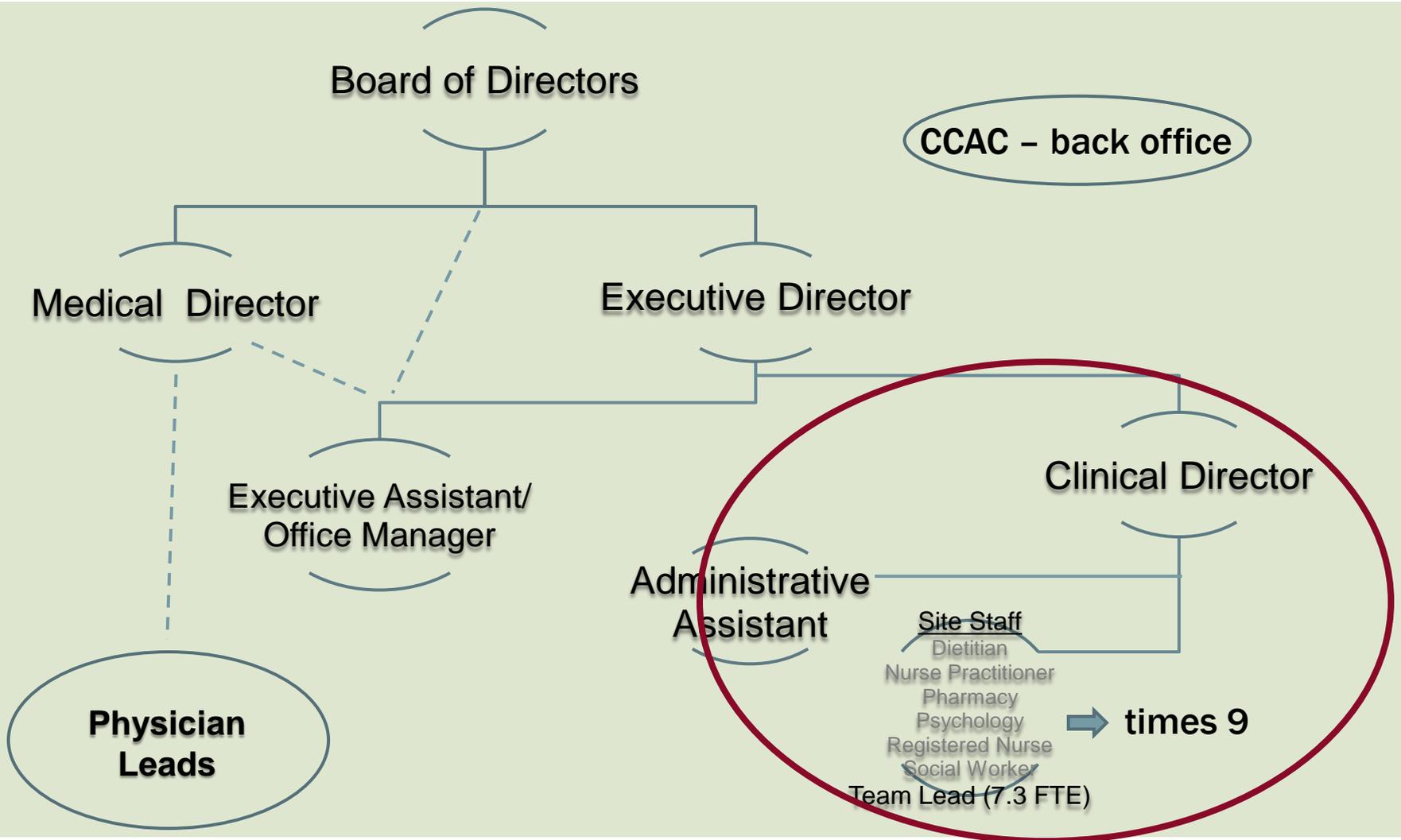


# CHALLENGES

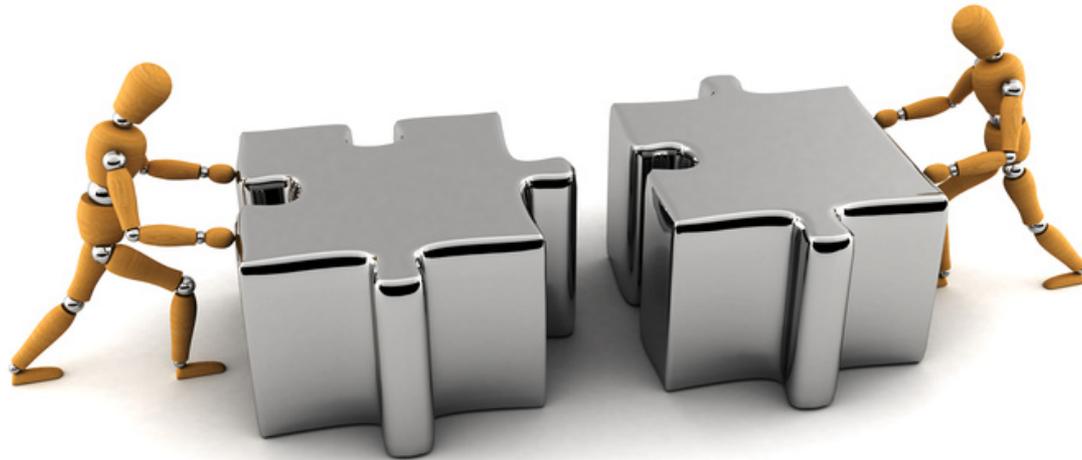
- **Geography**
  - Potential for Isolation
  - Potential for Siloization
  - Travel time
- **Different needs of Teams**
  - All starting from a different place
- **Different needs of Patient Populations**
  - e.g. diabetes
- **Different buy-in to / understanding of the FHT concept**
- **Implementing model at Hospital based FMCs**



# STRUCTURE



# CLINICAL DIRECTOR & TEAM LEADS



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# ROLE CLARITY

**Invite IHP from other site to join interviews or do pre-hire Q&A with site.**

Teams completed Individual Provider Inventories and discussed them.

- COMPETENCY “I have the knowledge and skills to do this”
- CONTRIBUTION “I have experience in doing this”
- PREFERENCE “I enjoy doing this, have the desire, expertise and special interest in this”



**New hires do presentation on their profession to team.**

**RN Roles –  
Developed a policy and related worksheet..**

**Chronic Disease & Primary/Secondary Prevention = 30%-70%**  
**Triage/Episodic Care = 30%-70%**  
**Traditional Pod/Clinic work = 0%-10%**

# COMMUNICATION

## ■ Face to Face

- “hallway”
- site quarterly mtg
- site FHT staff
- professional groups
- annual conference
- lead physicians
- ED, CD, MD
- cross-site program committees/teams

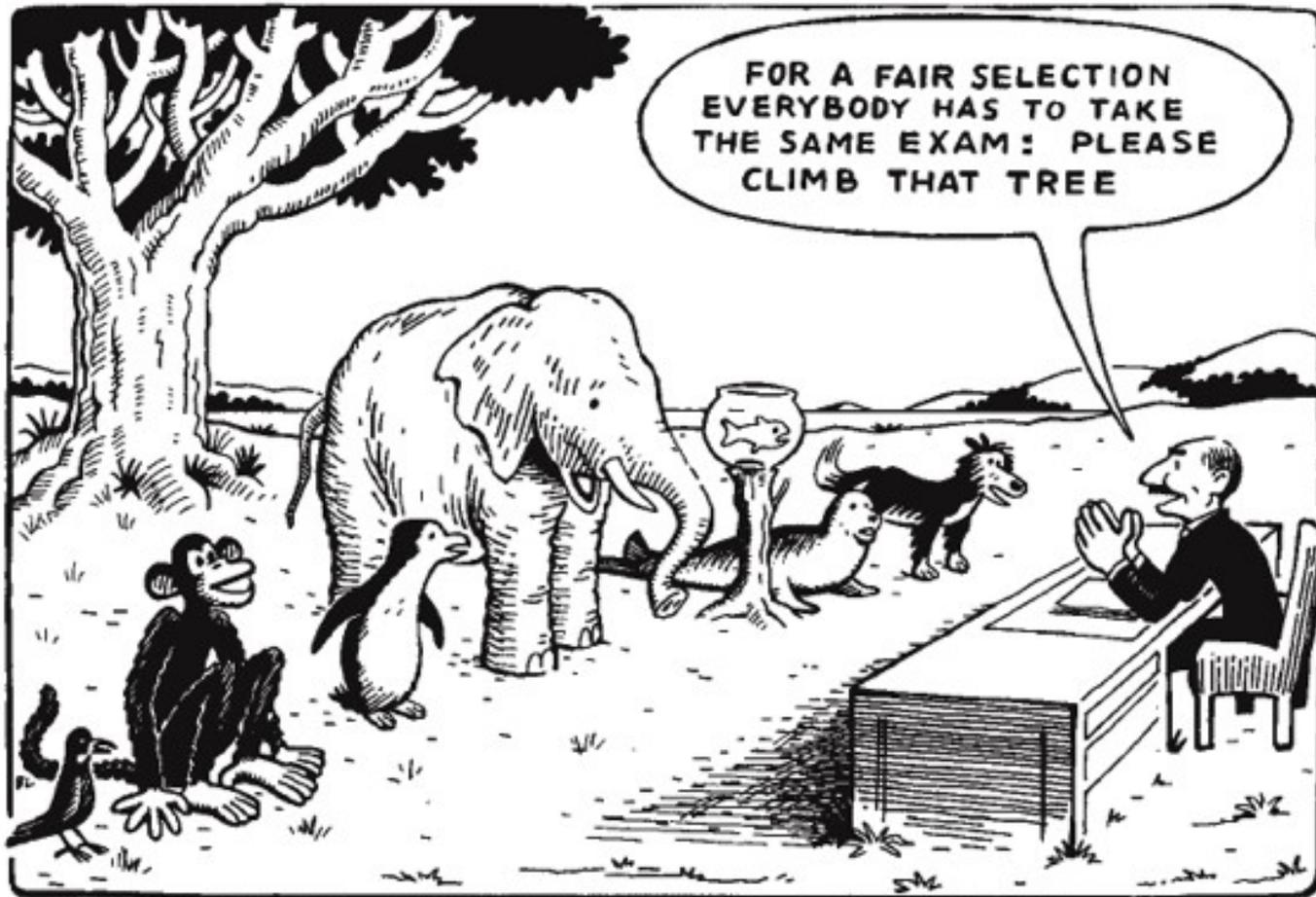
## ■ Other Media

- site newsletters (paper)
- FHT-wide newsletter (electronic)
- website
- email, IM at sites
- annual report

# **POLICY & PROCEDURE**

- 1. Staff Conflict Resolution**
- 2. Physician Relationship Framework**
- 3. Vision / Mission / Values**
- 4. Strategic Plan**
- 5. 8 P's of Meeting Protocol**
- 6. Medical Directives**

# MINDFULNESS



# STAFF & PHYSICIAN SATISFACTION SURVEY

- Response rate of 54% (40% of physicians, 78% of staff)
- General Themes : Successes (4.5 or higher out of 5)

<b>Interdisciplinary PHC teams improve care for patients</b>	<b>Interdisciplinary PHC teams improve health care services in my community</b>	<b>Interdisciplinary PHC teams improve care for patients with more complex dietary needs</b>
4.7 out of 5	4.6 out of 5	4.6 out of 5

# GENERAL THEMES – CONTINUE TO BUILD ON...

(Items at 3.5 or lower out of 5)

<b>Team members critically appraise potential weaknesses in order to achieve the best possible outcomes</b>	<b>Extent you think your team's objectives are clearly understood by the team</b>	<b>In this team, we take the time needed to develop new ideas</b>
<b>3.3 out of 5</b>	<b>3.5 out of 5</b>	<b>3.5 out of 5</b>

- From the comments – **Role Clarity** as an item for continued focus



# SATISFACTION - STAFF

*How satisfied are you with your job?*

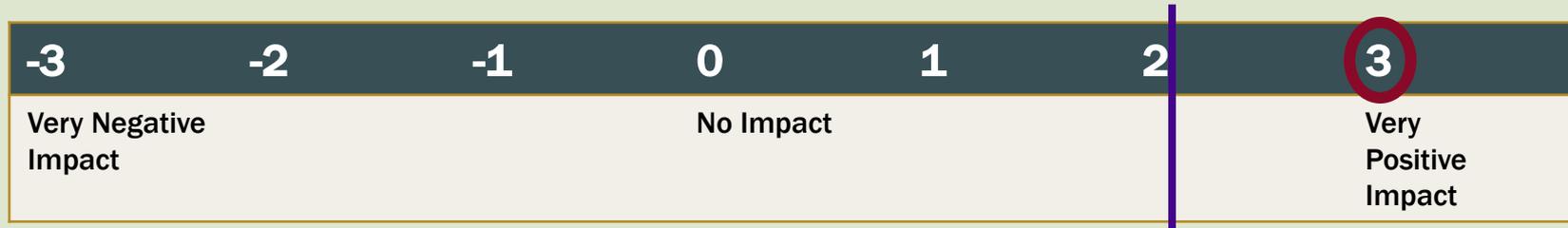
1	2	3	4	5	6
Very Dissatisfied	Fairly Dissatisfied	Minimally Dissatisfied	Minimally Satisfied	Fairly Satisfied	Very Satisfied

**Score of 5 or 6 = 85%**

\*\* Note: a few individuals rated this question a 1 but had significant positive comments and few or no negative comments – these may be instances of the scale being reversed. These results are left in as we have no way of knowing if this was an error or intended.

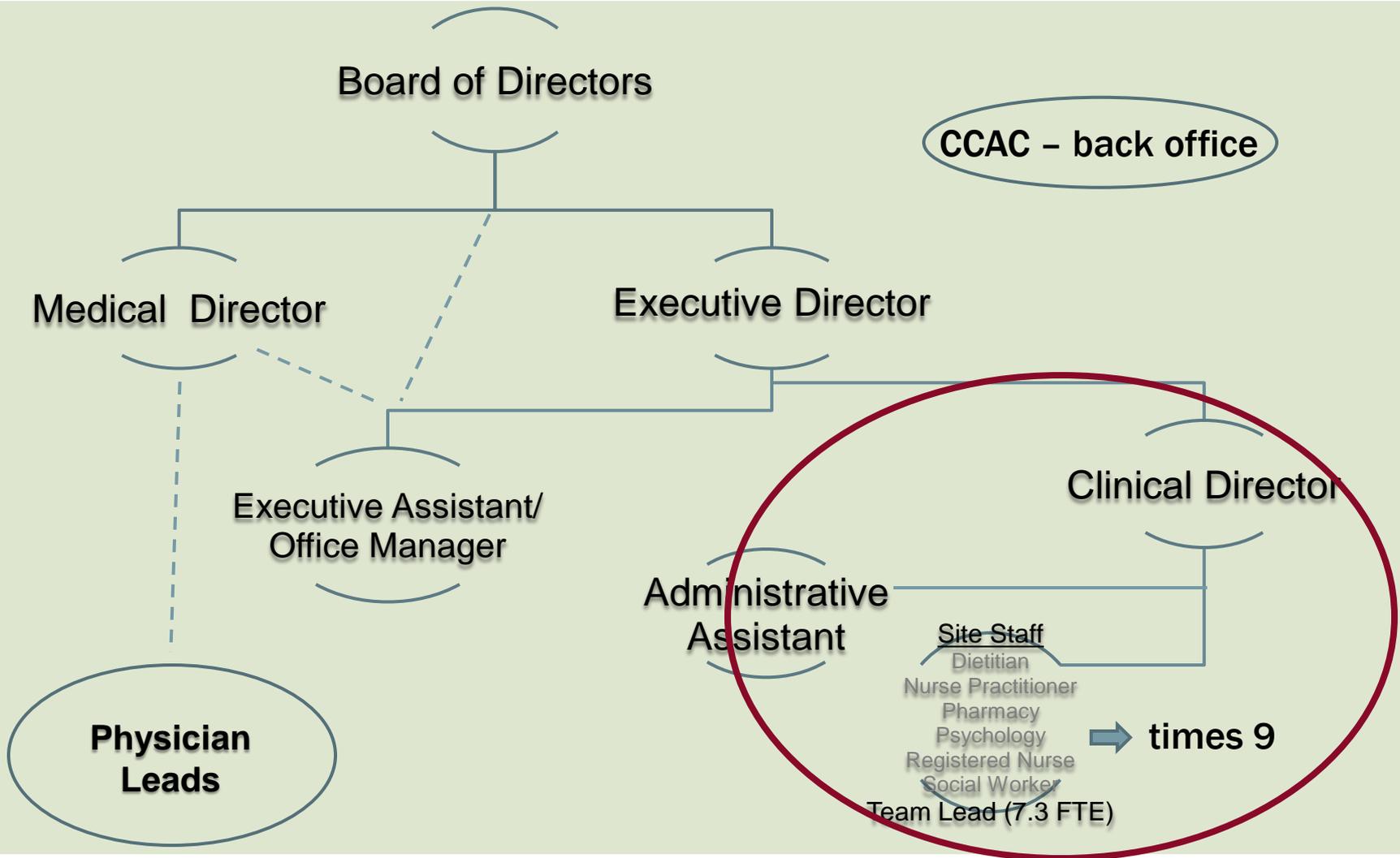
# SATISFACTION - PHYSICIANS

*Physicians – Overall, to what extent has working with TVFHT impacted your job satisfaction?*

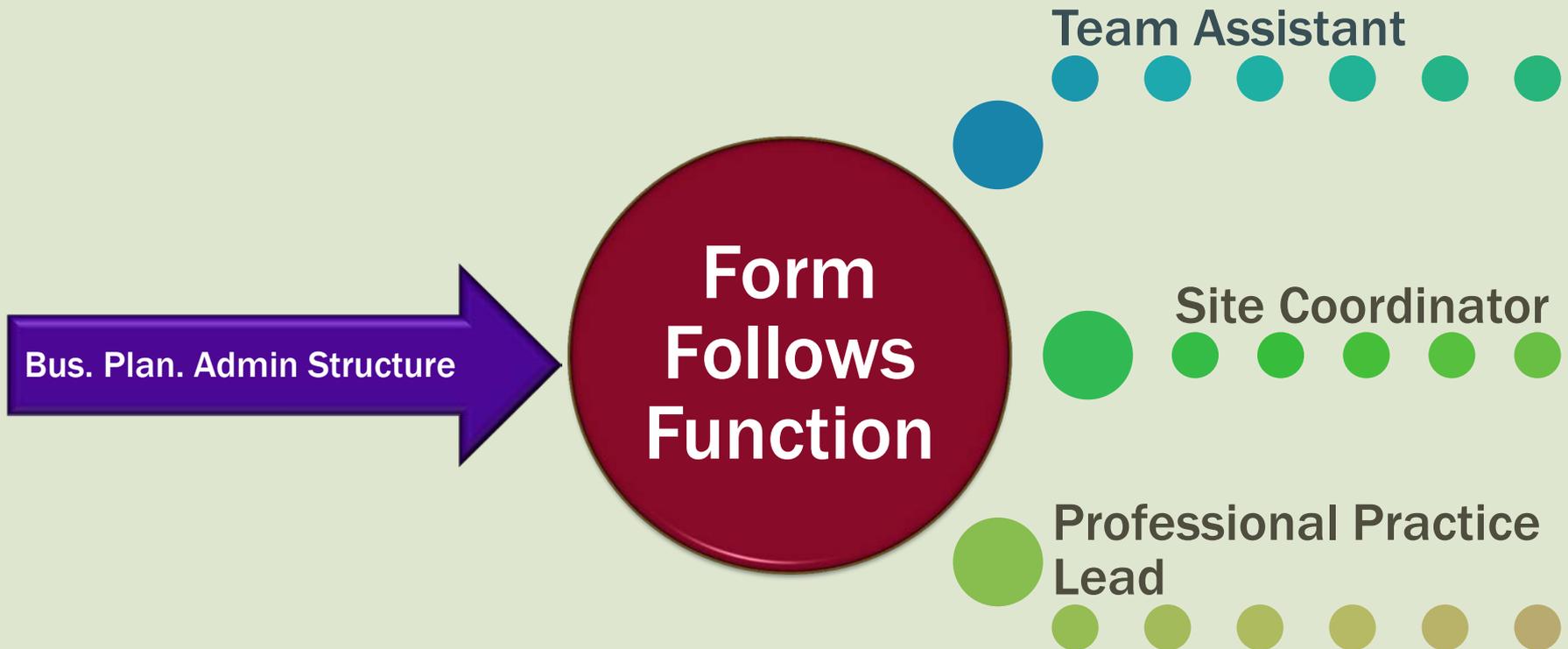


**Score of 2 or 3 = 78%**

# STRUCTURE



# IMPLEMENTATION OF A NEW STRUCTURE



# SITE COORDINATOR / TEAM ASSISTANT

## ■ Site Coordinator

- more leadership visibility at sites (each has 3-4 sites)
- ability to be more of a regular team member than CD
- regular meetings with CD to facilitate communications
- share between sites
- support each other

## ■ Team Assistant

- on-site team member
- focus on what admin support team needs to be successful
- has regular access to Site Coordinator

# PROFESSIONAL PRACTICE LEAD



# CLINICAL OPERATIONS LEADERSHIP TEAM (C.O.L.T.)



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# CURRENT CHALLENGES

## FUTURE DIRECTIONS



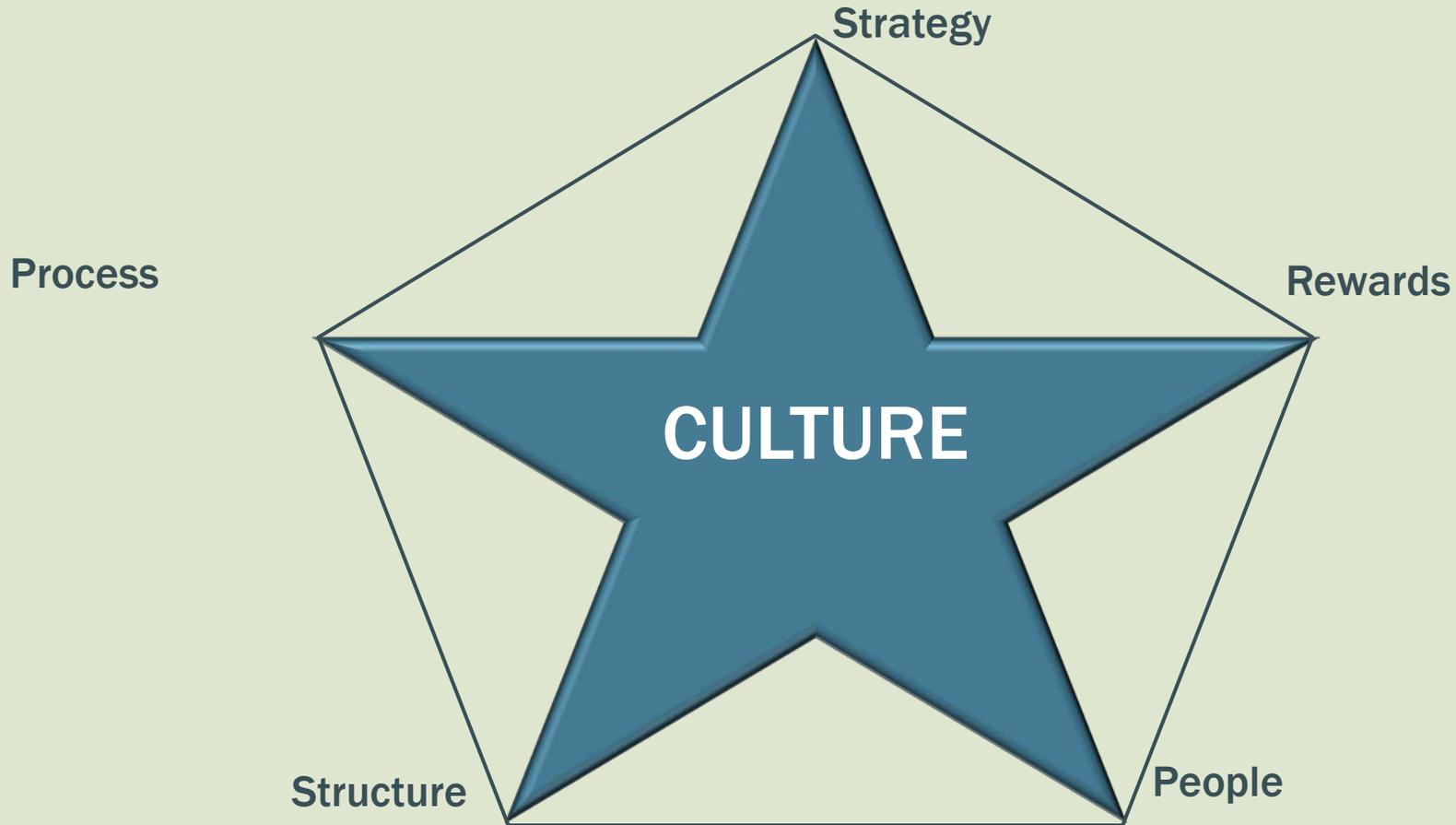
- focuses on the achievement of collective results
- holds one another accountable for delivering against those plans
- commits to decisions and plans of actions
- engages in healthy conflict around ideas.
- trusts one another

Source for framework: The Five Dysfunctions of a Team, Patrick Lencioni

# GUIDING PRINCIPLES FOR COLLABORATIVE TEAMWORK: WEST LONDON EXAMPLE

- Trust
- Rapport
- Accepting & sharing responsibility to solve problems, seek input
- Respect = natural process
- Open to change, adaptive, responsive, creative
- People, not roles
- Partnerships with patients & each other

# CURRENT CHALLENGES FUTURE DIRECTIONS



Source for framework: Star Model™, Jay Galbraith

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OBJECTIVES