Implementing Dyad Partnerships to Promote Team-Based Healthcare

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Introduction
Team-based healthcare is a critical driver for health system success. In today's value-based healthcare environment, patient centricity is at the forefront requiring a strong focus on the patient experience, quality and safety, clinical integration, care coordination, and waste reduction approaches. Dyad leadership (where clinical leaders are paired in partnership at each level of the organization) is a key ingredient toward integrated and coordinated team-based care delivery.

Palomar Health, the largest public healthcare district by area in California and the most comprehensive health care delivery system in northern San Diego County, recognized the need to develop its clinical (physician and nurse) leaders as partners in team-based care delivery to be better positioned for the future of value-based care.

Palomar Health developed a leadership academy in partnership with The Leadership Development Group, for clinical leaders to build leadership competencies, drive alignment, and facilitate a team-based care-giving approach. The program included a Dyad Activation Process, an experiential learning platform to enable clinical dyads to enhance their collaborative leadership skills in an effort to enhance patient outcomes. The Dyad Activation Process, a facilitated learning process, enables teams to identify solutions to problems that provide immediate, measurable impact and organizational results.

Background
Since early 2013, The Leadership Development Group has partnered with Palomar Health to design and implement its Academy of Applied Physician Leadership (The Academy). A key component of the program is a Dyad Activation Process to enhance clinical/non-clinical partnerships at the unit level. Effective dyad activation accelerates leadership development by facilitating the following:

- Partnering and relationship building
- High team performance
- Development of key leadership skills including behaviors impacting self, others, change, results and collaboration
- Peer coaching
- Encouraging creativity and innovation
- Providing opportunities to practice new leadership skills and behaviors in a safe environment

The Academy participants were broken into activation groups, by hospital unit, which consisted of groups of 5-8 clinicians (physicians and nurses) and in some cases, non-clinicians as well. The groups met formally on a monthly basis to work on their projects through a facilitated active learning process. The approach led participants through a process which included reflective listening, active questioning, challenging assumptions, and giving/receiving feedback while taking their projects from concept through to solution and implementation. The following case study showcases the dyad activation projects that focused on “No Physician Rounds Alone.”

Situation
At the start of the Dyad Activation Process, the situation on rounding was described as haphazard and lacking consistency. Historically, physicians and nurses were rounding on different patients at the same time or the same patient at different times; several physicians had the reputation of conducting “stealth” rounds where they would enter the unit, see the patient and leave before nursing staff knew they were on site. This uncoordinated effort resulted in lack of communication between physicians and nurses which had the potential to create:

- Errors
- Delays
- Increased costs
- Poorer outcomes
- Decreased patient satisfaction

Rationale for the Project
Desire to optimize daily rounding experience from patient, physician, and nurse perspectives and eliminate the negative consequences of physicians and nurses rounding separately.

Solutions
1. Established “No Physician Rounds Alone” protocol to facilitate physicians and nurses rounding together at the patient’s bedside.
2. In total, there were 5 units working on this project. The physician/nurse partnerships worked with their units over a 4-month period to create the ideal state for the rounding process, identify challenges and barriers, identify and engage key stakeholders, and implement the rounding process. Each unit had a different approach and solution designed for their units.
3. Tools used
   - Physician in Room button
   - Posters to encourage rounding
   - Nurse assignment boards
   - Huddles in advance of entering room
   - “Magic Minute” scripting for physicians and nurses
   - Thank you cards from nurses to physicians

Results
- On average, dyad members reported significant improvement in alignment compared to one year ago based on these criteria: meeting regularly, trust, communication, use of a dashboard, engagement, and making decisions together.
- The % of physician/nurse rounding increased dramatically on some floors, by as much as 40% after implementation of the projects.
- The dyad activation process led to a more thoughtful, comprehensive care approach and the alignment of physicians’ and nurses’ schedules.
- 100% of physicians and nurses surveyed responded “YES” to “Did you find rounding beneficial?”
- Nursing leaders and medical leaders reported better alignment in their expectations of one another and improved satisfaction with their relationships.

Conclusions
Palomar Health’s Dyad Activation Process developed strong leaders including physicians, nurses, and administrators and facilitated a team-based approach to healthcare delivery to set the stage for value-based care. The program also enabled physicians to work in partnership with their nurse and non-clinical counterparts on key unit-based projects while incubating partnership/team building behavioral skills and a more collaborative spirit and culture across the organization.

Participants gained valuable learning by going through the Dyad Activation Process including:

- An understanding of how their emotional intelligence impacts others
- Knowing how to be in partnership with others as a Palomar Health leader
- Knowing their role as a physician leader
- Having a clear purpose for their dyad relationship(s)
- Driving patient satisfaction and physician engagement
- The ability to use active listening and clarifying for understanding
- The ability to demonstrate empathy
- The importance of branding and communication in a change process

As the Dyad Activation Process unfolded other issues surfaced which are now being addressed including:

- Uniform implementation of the process
- Education of hospitalist
- Unified surveys and tracking tools

The overall Academy effort has resulted in significant improvements in patient perception of care as measured by Press Ganey scores:

- Overall Physician ratings increased from the 30th to the 66th percentile
- Overall Nursing ratings increased from the 33rd to the 82nd percentile
- Overall System ratings increased from the 14th to the 76th percentile