Cleveland Clinic’s New Team-Based Care Model Improves Patient and Provider Experience

For the past several years, the Medicine Institute has been piloting a team-based care model in which physicians work with medical assistants to provide primary care in outpatient clinics. The goal of the model is to improve the quality and efficiency of patient care by using the strengths of both physicians and medical assistants. So far, the results have been promising, with significant improvements in physician and patient satisfaction.

The team-based care model involves a physician working with 2 medical assistants during an outpatient clinic session. This model had initially been implemented here by one of our Family Medicine staff physicians (Dr. Kevin Hopkins) and was then later adapted by additional providers and care teams. The medical assistants as part of the care team start and end the visit with a patient and also scribe the progress note during the visit. We were excited to study the effects of this approach.

What did you learn?

As a primary care physician, I am very interested in how we can deliver high value care to patients based upon the characteristics of each practice.

We found that interpersonal fit on teams and system level support are important factors in making the transition to team care.

What surprised you the most?

It was particularly encouraging to quantify the feasibility and effectiveness of dedicated ambulator spotters. The objective of this study is to assess the feasibility of dedicated ambulator spotters on patients discharged to Skilled Nursing Facility (SNF) or long term acute care (LTAC) units. The study is a randomized controlled trial and will be conducted in an urban hospital setting. The primary hypothesis is that an ambulatory-assisted intervention for hospitalized elderly inpatients will prove feasible and may result in improved hospital outcomes, including less need for inpa-

tient rehabilitation and shorter length of stay in the hospital. This study will provide pilot data for a larger randomized trial.

Befit and lack of mobility in the inpatient hospital setting functions the functional decline of elderly patients and is associated with increased risk of complications such as falls, delirium, venous thromboembolism, and sepsis.

What are the obstacles to making this model of team-based care delivery models work well.

As dedicated care models continue to evolve, we will study their implementa-
tion and, specifically, the effects on providers and patients of recent redesign efforts in primary care deliv-
eries.

My future work will explore these factors among others in depth and report our findings in the near future.

Why did all choose to study this model of team-based primary care delivery?

Here are some interesting findings from our study:

- Physicians and patients spent more face to face time in the new model and it may prove beneficial. Importantly, we found that patients were more satisfied in the new model.
- The team-based care model resulted in higher patient satisfaction compared to the traditional model.
- Physicians found the team-based care model to be more efficient and effective.

How will your research impact the Cleveland Clinic at the Cleveland Clinic?

We will use what we learn here to help develop a broader model of team care in Cleveland Clinic. We will use our findings to guide the implementation of this model throughout the institution.

What are the limitations to making this model of team-based primary care delivery more widely applicable?

We believe that anyone interested in outcomes and system level support important factors in making this model widely applicable. It will be important to develop a broader model of team care that can be implemented in different settings and with different patient populations.

In this article, we asked her about this important work.

Dr. Taksler at taksleg@ccf.org

- Blackstone EH; Cardiovascular Meta
  Analysis
  Investigators: Aaron Hamilton, MD, MBA, FACP
  - Cardiac Research Institute (CRI)
  - Based Care Research

Featured study-in-progress: Dedicated ambulator-assisted physical activity to improve hospital outcome measures in elderly patients: A randomized controlled trial

Principal investigator: Aaron Hamilton, MD, MBA, FACP

Contextualizations: Michael Rothberg, MD, MPH; Abhishek Deshpande MD, PhD, Mary Shapira, BA, Hu, PhD

Featured Publication

CVCR

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