

# Providing High Quality Team-Based Care: Why the Physician? (Part 3)



Regional thought leaders weigh in on physician-led team-based care. This is what they have to say:

As healthcare gets more complex and patients live longer with more co-morbidities, it's become evident that no one single medical practitioner can provide the gamut of care needed. EMRs are the foundational units for providing good high quality care in that they can capture discrete data elements that can be analysed and acted upon for cycles of improvements.

Physicians who can navigate the complex world of medical knowledge and who can tailor for the specific needs of their patients need to be guided by the input of their fellow medical colleagues, nurses and allied health professionals. Medical IT can bridge that communication gap in a multi-disciplinary team and can even value add by bringing relevant information to the forefront.

**Adj. A/Prof. Gamaliel Tan**, Chief Medical Informatics Officer; Head, Orthopaedics, Jurong Health Services, Singapore



The patient-centered medical home (PCMH) is a team based health care delivery set of principles led by a physician that provides comprehensive and continuous medical care to patients with the goal of obtaining maximized health outcomes. It is "an approach to providing comprehensive primary care for children, youth and adults."

As one of the key founders of PCMH, IBM has played a significant role in the PCMH principles and many of its employees are part of this initiative. The medical homes allow better access to health care, increase satisfaction with care, and improve health all at a lower cost. At the core of the PCMH is the patient's personal, comprehensive, long-term relationship with his or her primary care physician (PCP).

Patients with a PCP will incur about a third less healthcare expenditure and will have 19% lower mortality. They are 7% more likely to stop smoking and 12% less likely to be obese. Thus, PCMH's team-based care places the PCP at the forefront as the physician's role drives quantifiable health improvements across patient populations. Rather than being just a resource for episodic care, the PCP-led care team assumes proactive prevention, wellness, and chronic illness care, becoming the patient's confidant, coordinator and advisor for all aspects of healthcare.

**Farhana Nakhoda**, Healthcare and Social Services Director, IBM Asia Pacific, Industry Academy Member

The American Medical Association defines the term "physician-led" in the context of team-based care as the consistent use by a physician of the leadership knowledge, skills and expertise necessary to identify, engage and elicit from each team member the unique set of contributions needed to help patients achieve their care goals.

It has been decades that Healthcare IT has continuously evolved and now is proving its benefits on efficient patient flow, lean processes, and most of all safer and higher level of care for our patients.

At this stage, technologies can integrate practice units and care facilities altogether across geography and be able to help care providers to have care solution(s) planned and provided at the point of care as well as the outcome(s) predicted for each patient.

At this stage, having multispecialty, multi professionals working "collaboratively in a blameless way" would be considered as a crucial step to move forward that would open up everyone to speak while physician leaders shall then use their knowledge & expertise together with their leadership skills for the team. Great teamwork that plans to achieve measurable goal(s) for each of their patients.

**Dr. Korpong Rookkapan**, Hospital Director, Paknam Hospital, Thailand

China started embracing private healthcare delivery as a welcomed addition to the legacy public healthcare institutions.

One of the differential factors for our organization is to offer a distinguished multidisciplinary team-based model of care to our patients and clients supported by technology.

Clinician-led service planning demands a relentless drive to make our cared communities much healthier based on the value of care offered. Such model requires iterative consultation and creative co-design and co-management of care amongst our clinicians and patients.

There is a need for innovation to achieve excellent care through integrated care delivery model, and how individual and community outcomes are enmeshed. We hope that provider and patient relationships can be preserved at the same time as the health of much larger groups is advanced.

**Dr. Francis Qiu**, Chief Medical Information Officer, Jiahui International Hospital, China



The positive outcomes of physician-led team care are clear in our Code Purple program where pre-critical patient conditions are proactively defined and monitored. Once established criteria are fulfilled, the code is activated. This reduced the number of Code Blue calls and subsequent mortality rates from 57% to 13%. Additionally, the average cost of care is lower by 20% and the lengths of stay are shortened by 13%.

The formation of the Brain Attack Team to respond to acute strokes has resulted in the time to response and imaging to steadily decrease from double to single digit minutes. This has increased the number of rtPA eligible patients to fall within the optimal time window of administration.

At the Asian Cancer Institute, the multidisciplinary teams of physicians, nurses and counselors are designed around the patient. This has brought down the fallout rate for treatment and subsequent follow up. Expanding team based care evidently is the way forward.

**Dr. Juan Antonio G. Javellana, MD**, Director of Medical Informatics, Asian Hospital and Medical Center, Philippines

To cope with the ever-increasing burden on, and demand for, healthcare services new approaches are required that will increase the productivity of healthcare providers without an increase in administrative burden.

Team-based care provides unique opportunities to reduce non-essential tasks and duplication of work through a model that promotes greater engagement of patients with all their caregivers to accomplish shared goals.

Essential in such an approach is the availability of an ICT system that allows all stakeholders to securely access and effectively use the information being generated, which has a user-centric design and organises all the work for team members in an intuitive way. In recognition of the growing role patients play in the delivery of their own care, such a system must also allow the patient to be fully engaged, informed and integrated in all applicable care team activities.

The Agfa HealthCare Engage Suite provides a platform for (physician led) team-based care that supports care management and access to patient health information beyond hospital walls, for patients and care providers alike. It offers features and functionality for care coordination and integrated care, enabling each stakeholder to prepare, follow and monitor the patient's care through greater collaboration and communication, as part of a team-based care environment.

**Matthew Koch**, Imaging IT Product Manager ASPAC, Agfa HealthCare



Physicians will continue to experience pressure to become more efficient while improving the delivery of patient care. The reality is, they can't do it alone.

A team-based care approach provides a foundation for better communication among physicians, nurses, and other care team members.

That's where Spok comes in. The Spok Care Connect® platform improves care team communication and allows delivery of critical information quickly to clinicians on the device of their choice. One Spok customer reduced formal complaints regarding a lack of communication by 75 percent. Another customer was able to cut the amount of time it takes to initiate a code by half.

Spok's patient-centric messaging capabilities allow physicians and nurses to get the information they need when they need it, allowing more effective collaboration among care team members.

**Hemant Goel**, President, Spok



This article is Part Three of a Three-Part series discussing physician-led team-based care. [Click here](#) to read Parts One and Two.