Learning Collaborative Learning Event: Building an Interdisciplinary Care Team
Today’s Learning Objectives

After this presentation you should be able to:

• Understand why a multidisciplinary care team is important when planning and implementing your QI

• Engage and build a successful team and understand how to maintain engagement throughout QI implementation

• Understand the benefits of reaching out to your QI department early
Who Should be on the Team?

An interdisciplinary team is vital to hospital-based malnutrition quality improvement. Team members suggested below will vary based on your facility’s unique circumstances.

Consider using the MQii Project Teams and Workflow Mapping Presentation to support you in selecting your team.
Today’s Presenter:

Jill Johnston, MS, RD, LD
Clinical Nutrition Manager,
West Virginia University Hospital
WVU Medicine Health System
### Why is it Important to Engage a Multidisciplinary Team?

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<tr>
<td>1</td>
<td>Facilitates appropriate malnutrition-related patient care from admission to discharge</td>
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<td>2</td>
<td>Promotes important engagement by care providers across all stages of the workflow (e.g., nurses often are responsible for screening, and physicians are typically required to make a diagnosis)</td>
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<td>3</td>
<td>Includes the patient and family/caregivers in efforts to address gaps in the hospital’s malnutrition care, including tailoring activities to patient preferences and experience</td>
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It will be critical to engage patients and family/caregivers in your project to ensure its success.
Key Care Team Members at Each Workflow Step

Malnutrition Care Workflow

**Workflow Phase**

- **Screening**
  - Nutrition screening using a validated tool for all patients with a hospital admission

- **Assessment**
  - Nutrition assessment using a standardized tool for all patients identified as at-risk for malnutrition

- **Diagnosis**
  - Documentation of nutrition diagnosis for all patients identified as malnourished or at-risk for malnutrition

- **Care Plan Development**
  - Establishment of a nutrition care plan for all patients identified as malnourished or at-risk for malnutrition

- **Intervention Implementation**
  - Implementation of a nutrition care plan including treatment for all patients identified as malnourished or at-risk for malnutrition

- **Monitoring / Evaluation & Discharge Planning**
  - Implementation of processes, including discharge planning, that support ongoing monitoring and support the care of patients identified as malnourished or at-risk for malnutrition

**Clinician Typically Responsible for Each Step**

- Nurse
- Dietitian

- Dietitian

- Physician
- Dietitian

- Physician
- Dietitian
- Nurse

- Physician
- Dietitian
- Nurse

- Physician
- Dietitian
- Nurse

**Patient / Caregiver**
Tips for Successful Team Collaboration

- Understand that culture of quality improvement is local, even to specific units and teams.
- Include staff members who have different levels of experience and roles (including staff who might be outside the traditional care team, as applicable).
- Have clear goals and ensure you have adequate resources to achieve them.
- Meet as regularly as possible and establish clear mechanisms for communication.
What Makes a Successful Project Team Member?

IDENTIFYING STRONG PROJECT TEAM MEMBERS WILL HELP ENSURE YOU HAVE THE SUPPORT YOU NEED FOR SUCCESS

**Leader**
An individual who is recognized by their peers as a leader or champion

**Dedicated**
Someone with adequate time and can remain engaged on an ongoing basis for the foreseeable future

**Passionate**
Understands the importance of malnutrition to overarching patient care and is driven to see improvements

**Innovative**
Has a demonstrated interest in innovation, notably through prior QI experience
## Roles and Responsibilities for Your Team

<table>
<thead>
<tr>
<th>Member</th>
<th>Role</th>
<th>Suggestions</th>
<th>Est Time</th>
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</thead>
<tbody>
<tr>
<td>Executive Sponsor</td>
<td>Hospital Leader to champion the effort from a leadership perspective, works to maintain executive leadership buy-in. A representative from the hospital's C-Suite is highly recommended.</td>
<td>Executive Sponsor and Project Champion should establish regular meetings (i.e., bi-monthly) to receive progress updates.</td>
<td>~1 hour per month to review progress and approach</td>
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<tr>
<td>Project Champion / Lead(s)</td>
<td>Leads day-to-day efforts for this initiative. Develops project management processes and spreads enthusiasm across hospital for this project. Reviews all educational webinars, attends expert webinars, participates in discussion boards and leads project implementation (e.g., leads clinician training)</td>
<td>Project Champion / Lead(s) should establish a team of champions and lead regularly scheduled “huddles” throughout this effort to discuss barriers and next steps.</td>
<td>10 - 15 hours per month (depends on QI focus and resources)</td>
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<tr>
<td>IT Developer and/or Report Analyst*</td>
<td>Assist with extraction of data elements required for eCQMs, length-of-stay, readmissions, as well as any other necessary data.</td>
<td>Should maintain regular communications with the Project Champion to ensure proper and timely data extraction.</td>
<td>40 hours total on average</td>
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* Tier 2 participants not transmitting data may forego this member of the team depending on their approach to data collection
## Roles and Responsibilities for Your Team - Champions

<table>
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<tr>
<th>Role</th>
<th>Value-Add and Role</th>
<th>Est Time</th>
</tr>
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<tr>
<td><strong>Dietitian Champion</strong></td>
<td>If the Project Champion is not a dietitian, we recommend securing buy-in from a dietitian leader (CNM or Director) who will champion this effort in the nutrition department and make sure targeted QI changes are adopted. If the Project Champion is a dietitian, this role would overlap.</td>
<td>4 – 6 hours per month (Depends on QI focus) or refer to Project Champion if dietitian is project champion</td>
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<td><strong>Nurse Champion</strong></td>
<td>Nurses are the first line of defense to identify malnourished patients. They also play a critical role in implementing interventions and discharge planning. Having a nurse champion involved can facilitate training and education of nursing staff to make sure their nutrition care responsibilities are implemented effectively.</td>
<td>3 – 4 hours per month (Depends on QI focus)</td>
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<td><strong>Physician Champion</strong></td>
<td>Clinician who generates support and buy-in for project by all relevant parties, and can communicate to other physicians in the hospital. Steps in when needed to move project forward. Physician Champion should meet at least monthly with the Project Champion to provide input and update communication to physicians.</td>
<td>2 - 3 hours per month</td>
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# Roles and Responsibilities for Your Team - *Other*

<table>
<thead>
<tr>
<th>Recommended</th>
<th>Value-Add</th>
<th>Est Time</th>
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<tr>
<td><strong>Sustainability Team</strong></td>
<td>The sustainability team is designated by the Project Champion and could consist of a physician, nurse, and dietitian who is NOT the nurse or dietitian champion. The role of the sustainability team is to make sure improvement efforts are sustained once implemented.</td>
<td>1 hour a month to attend huddles</td>
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<td><em>(strongly recommended)</em></td>
<td></td>
<td>In Post-Implementation may increase to 2-4 hours per month</td>
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<tr>
<td>Patient Advocate / Patient Representation</td>
<td>Although this may take slightly different forms across different health systems, the role of the patient voice is pivotal to the success of quality improvement. A patient’s perspective may add essential insights about their experiences within the healthcare system that can inform the direction of a particular project.</td>
<td>Dependent on frequency of project team or steering committee meetings</td>
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*Evidence shows, improvement efforts that have a sustainability team are 75% more likely to be sustained longer-term compared to efforts that do not*
How to Recruit Project Team Members

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<th>Identify Champions</th>
<th>Create a Value Proposition</th>
<th>Attend Team Meetings</th>
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| • Reach out to colleagues you already know and/or have previously worked with on quality improvement projects
| • Share statistics about the prevalence, burden, and impact of malnutrition on hospitalized patients
| • Attend team meetings across disciplines to discuss the initiative and gauge interest across different clinician groups
| • Engage with your Quality Department to see if they can recommend clinician leaders with whom they have previously worked
| • Link opportunities associated with MQii Learning Collaborative participation to institutional priorities, goals, and metrics
| • Share the opportunity to raise visibility of the team and leadership through presentations and publications of results

Once you have identified potential Project Team members, use the MQii Stakeholder Letters to conduct outreach.
Sustaining Engagement

ONCE YOU HAVE IDENTIFIED YOUR TEAM, IT IS IMPORTANT TO KEEP THEM ENGAGED THROUGHOUT THE DURATION OF THE INITIATIVE

- Identify clear roles and responsibilities
- Schedule standing team meetings but be flexible in communication approach – utilize email and ad hoc meetings wherever necessary
- Solicit feedback from members early and often

Consider using the MQii Sample Meeting Agenda for a template of topics to address at your regular MQii Project Team meetings
# Case Studies

**FIND THE PROJECT TEAM COMPOSITION THAT WORKS FOR YOUR FACILITY, THERE IS NO ONE “RIGHT” ANSWER FOR SUCCESS**

<table>
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<tr>
<th>Site Type</th>
<th>Academic Medical Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Site Location</td>
<td>Urban South</td>
</tr>
<tr>
<td>Bed Size</td>
<td>Large (&gt;500)</td>
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**Project Team Members:**
- Physician and Nurse Champion
- Hospitalist
- Additional Nursing Representation
- Additional Dietitian Representation
- Quality Department Representative

**Participant Thoughts on Project Impact:**
- “Malnutrition care recognition and care intervention has become a talking point, and something we need to address. And it's become other people's priority, not just nutrition people.”

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<td>Urban Mid-Atlantic</td>
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**Project Team Members:**
- IT Champion
- Physician Champion
- Quality Department Representative

**Participant Thoughts on Project Impact:**
- “We've always known we have an impact [on patients], this is something we've been able to do as a part of this national quality initiative to get that recognition and get that understanding a little deeper and get that spread throughout this facility.”
- “We're able to catch more of these [patients] and have more of an impact on their lives.”
Resources

- “What’s My Role” & Associated One-Pagers (Link)
- MQii Stakeholder Letters (Link)
- MQii Briefing: The Value of Quality Malnutrition Care (Link)
- MQii Overview Presentation (Link)
- The MQii Project Teams and Workflow Mapping Presentation (Link)
- MQii Sample Meeting Agenda (Link)
- Learning Collaborative Participant Quotes (Link)
- Learning Collaborative Participant Videos (Link)
Have Questions

Please reach out to a member of the MQii Team at MalnutritionQuality@avalere.com