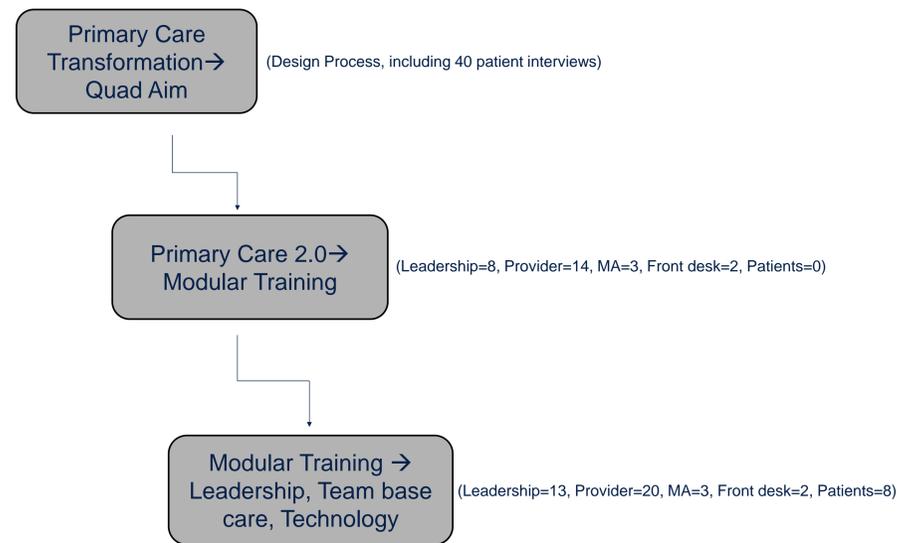


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Problem Statement

To fix the broken primary care system at Stanford Health Care (SHC) that led to low value care and burnt out doctors and staff, we aimed to create multidisciplinary team-based practices to promote the quadruple aim.

Discovery



- Interviewees (56)
 Patients = 8
 Primary Care Providers = 26
 Front desk staff = 2
 Medical Assistants = 5
 SHC leadership = 5
 SOM leadership = 6
 UCSF leadership = 2
 Other leadership = 2

Goals and Objectives

Goal: To transform SHC's primary care practices to promote the quadruple aim.

Outcome-oriented Objective:

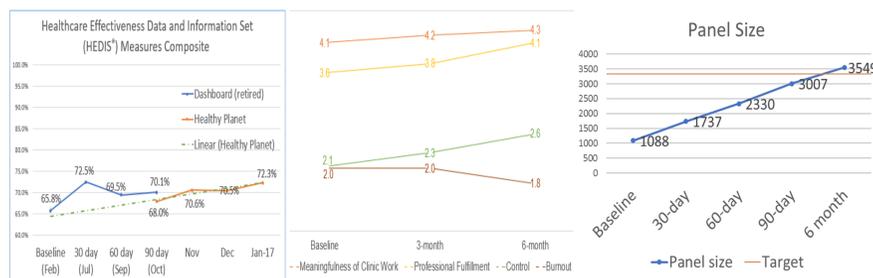
- Over 12 months, Primary Care 2.0 will lead to:
- 10% improvement of Patient experience survey (Press Ganey) scores – Likelihood to recommend and Staff work well together
 - 100% increase in Team Development Measurement survey score
 - 10% improvement on composite of HEDIS-based quality measures
 - 20% increase in joy of practice survey score
 - 50% growth in clinic volume

Results

Patient Satisfaction and Teamness Outcomes



Quality, Growth and Joy of Practice Outcomes



Lessons Learned

Lessons Learned:

1. Embedding an evaluation of the implementation of Primary Care 2.0 benefited the clinic team, SHC operations, and SOM.
2. PC 2.0 implementation has been a burden to providers and staff, but strong teams are protective against change fatigue.
3. Transformation is disruptive and that, to be successful, organizations need to have the motivation to change, even when the financial model exists.
4. Transformation needs to occur by reinvention of professional identities and convincing the members of the culture of medicine that the most needed change is a change in their very being.

Next Steps:

1. Inspire a cultural transformation towards value based, team based care across primary care and across the entire system at Stanford Health Care.
2. Establish primary care 2.0 as the change agent for Stanford Health Care, and a differentiator for the market.
3. Become the preeminent setting for primary care transformation nationally.

Mission Model Canvas

Key Partners <ul style="list-style-type: none"> Medical Informatics SHC senior leaders 	Key Activities <ul style="list-style-type: none"> Train clinic leadership of 5 clinics on modules. Develop online training and trainers for each module. Onsite training in clinics Onboarding and refresher support 	Value Propositions <p>Building on the evidence base for advantages of team-based care, Stanford Health Care aimed to develop a team-based Primary Care model to achieve the Quadruple Aim.</p> <p>Stanford Primary Care will be recognized as a preeminent primary care system (both as national thought leaders, and as local market disruptors) by providing outstanding care, that improves the health and wellness of our patients, with industry-leading patient experience that is affordable and improves value.</p>	Buy-in & Support <p>Presentations at Faculty meetings and Leadership meetings</p>	Beneficiaries <p>Primary care physicians and staff</p>
Key Resources <ul style="list-style-type: none"> Protected time for me, admin and faculty leads Staff to conduct the program Data analyst Minor retrofitting of facility 		Deployment <p>HealthStream®</p>		
Mission Budget/Cost <p>Initial intense upfront investment in staffing leading to loss of revenue</p>		Mission Achievement/Impact Factors <p>Successful implementation of the model is evidenced by (1) elimination of physician and staff burn out leading to a savings of up to 10 million dollars a year, (2) increase in national ranking for quality and costs, (3) leader in the regional market for new patient growth.</p>		