

A Success Story...

EMBRACING THE COLLABORATIVES WAY

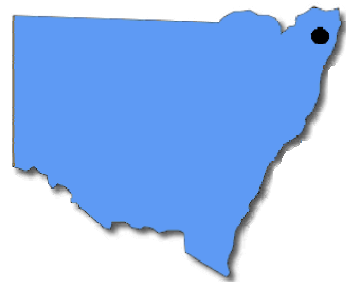
Building, structuring and developing
the practice team

Brunswick Heads Medical Centre - NSW

This case study recounts the steps taken by the team at Brunswick Heads to devise a model which summarised and reflected a best practice model for team building in the practice.

The focus of the model was to reflect the change management principles of the Collaboratives Program, as well as the practices' over riding premise to provide proactive, multifaceted patient care. Patients are encouraged to be part of the Brunswick heads Medical centre team and to participate fully in all aspects of their care.

Activities undertaken in the process of developing the model include brainstorming; practice team activities to build trust and group cohesion; database searches; inter practice visits to other general practices; identifying mentors within the practice team; as well as activities designed to engage the community and ensure community input.



Context

The Brunswick Heads Medical Centre is a rural practice (classified RRMA 5) in the Northern Rivers General Practice Network area in Northern New South Wales, only 30 minutes from the Queensland border. Brunswick Heads is tourist and fishing town, surrounded by large urban areas.

The population of Brunswick Heads is mixed, made up of predominantly aged, self funded retirees, young families and an itinerant tourist population. The outer drawing area includes urban estates of young people, single mothers, people on pensions and other associated social security benefits. The practice is the only one in town and the GPs are Visiting Medical Officers at the small hospital in nearby Mullumbimby (10km away).

The GP Principle is a GP/Obstetrician who delivers up to 60 babies per year. The practice data base has 6,087 active patients and reflects a high incidence of Diabetes, Coronary Artery Disease and mental health issues. The practice has two GPs (0.8 FTE each) and one registrar; with a Clinical Psychologist; a Practice Manager and four part time Administration staff.

"The change to staff morale has been amazing. Staff felt (and still feel) that they were valued and encouraged to contribute ideas."

The Situation

The need to address the issue of team building in the Brunswick Heads Medical Centre arose because of changes to the doctor, management and reception staff and was motivated by the practice's involvement in the Collaboratives Program. The areas to be addressed included:

- The valuing of all members of the team
- Provision of education and strategies to encourage currency in all areas
- The valuing of collective decision making
- Strengthening links with the community
- Involving patients in their own care and encouraging them to take responsibility for their own health

There needed to be changes to ensure that each member of the practice team felt valued, took responsibility for decision making and reflected and espoused the values of the practice, providing best patient care for all.

The Change

The objective was to devise a model to ensure and encourage whole of practice team cohesion. This required team building initially. A plan was developed to provide a variety of activities aimed at encouraging all staff members to participate in the design of the practice team building model. These activities included:

- A suggestion box for staff to place ideas
- A half day weekend workshop involving trust games, active listening and dealing with constructive criticisms exercises, and an emphasis on the valuable contribution of every member of the team to the practice. After a B-B-Q lunch families were invited to join in the fun and games and the social aspect was as important as the more focused activities. The Practice Manager provided a carefully selected personalised gift for each member of the team
- An evening meeting with food and wine provided by the principle GP where all participated in brainstorming ideas which were used to create a mind map. Over the next few weeks staff added to, made changes to and refined the mind map which was displayed on the tea room wall.

These activities were conducted during June and July 2007 with the program coordinated by the Practice Manager. The model was developed and is being implemented as practice policy. The philosophy, concept and model was communicated to all staff through the noticeboard and at staff meetings and to the patient community via posters in the patient reception area. Strategies to involve and inform the local community health centre were very important to the model. Three patients were invited to review and comment on the model, as were members of a large group general practice in Murwillumbah.

According to the Practice Manager the only problem was the degree of enthusiasm shown by staff! There were so many good ideas that the final map needed to be streamlined and refined by her. The result was a model that included staff validation, the Collaboratives change management principles, community links and building partnerships. The model is deemed to be 'a working one' and will be evaluated regularly to ensure that it continues to fit the practice philosophy of inclusion.

"[There was] an emphasis on the valuable contribution of every member of the team."

The Outcome

The change to staff morale has been amazing. Staff felt (and still feel) that they were valued and encouraged to contribute ideas.

The impact on patients has been and continues to be great. The links with the community have been strengthened and used to actively promote proactive multidisciplinary patient care. Patients are considered vital members of the team.

Changes continue. New concepts have been developed such as:

- A staff mentoring model where one person passes on new skills learned or important information to another who further spreads the learning. This ensures that in a workplace with part time staff, all are up-skilled and kept informed
- Off site 'work experience' at other practices to learn different ways of doing things
- Staff are encouraged to participate in community activities

Staff joined the 10,000 steps 'Walk from Byron to Carnarvon' race, a challenge issued by Alstonville Clinic to Collaboratives practices:

"Yes definitely! We now provide seamless care to patients and our community – a change which is now programmed, provided by staff who are vital to the process, who share the practice goals and are proud to be an integral part of the work."

We will continue to build and evaluate our model and staff and patients will be encouraged to actively participate in all activities."

Support Material

- Mind Map
- Posters
- Chart (with model drawn on it)

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