

Restoring Alignment: Patient-Centered Multidisciplinary SpineCare in a Changing Health Care Environment

Marjorie C. Wang, MD MPH Medical College of Wisconsin



Background

- Spine conditions are among the most common reasons to seek medical care in the U.S.
- Since many types of providers treat spinal disorders, patients may access our clinical system through multiple portals and receive fragmented, siloed and inefficient care.
- The Medical College of Wisconsin SpineCare clinic model was designed in the 1990's to provide an integrated guidelines-based multidisciplinary approach to spine disorders but not all provider specialties were included, leading to boundaries and cost-inefficiencies across the organization.

Purpose

The purpose of this Institutional Action Project is to develop teams and methods to strategically drive transformational change of SpineCare to meet and anticipate patient needs in our changing healthcare environment, propel growth of the academic enterprise beyond organizational boundaries, and create market opportunities.

Methods

- Stakeholder buy-in from key leaders was obtained through individual and group meetings.
- The stakeholders included the spine strategic steering group, president of service lines, chairpersons and leaders at the multiple hospitals and clinic settings where spine care is delivered as well as key provider leaders in multiple departments.
- Using an iterative process, common themes and concerns were assessed until saturation was achieved.

A current state evaluation was completed

We then created a priority and effort matrix to identify key strategies and by consensus, assigned impact and effort to each project with an enterprise-wide diverse perspective.

Projects were initiated from the matrix.

Outcomes

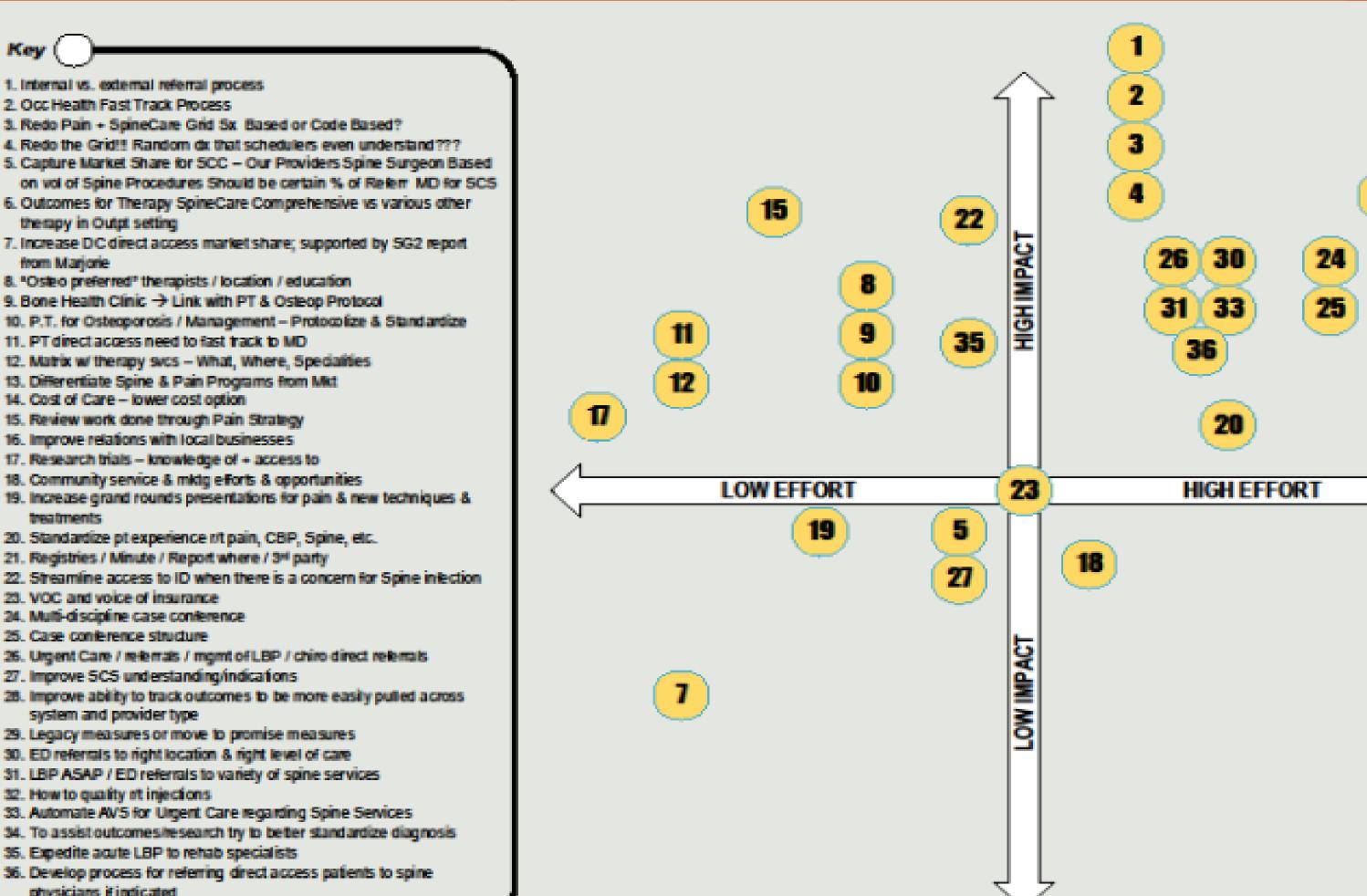
Objectives	Deliverables	Outcomes
1. Obtain buy-in from key leaders for spine services.	Vision, value, and challenges discussed. Alliances formed to maximize opportunities.	Spine Service Line restructured to Surgical Spine and Multimodal Spine and meetings initiated.
2. Obtain engagement of key stakeholders who provide spine services across the organization.	Strategic planning exercises with buy-in from key stakeholders and leaders.	Action Priority Matrix created.
3. Set strategy and objectives; drive organizational change by implementing projects from the Action Priority Matrix.	Workgroups initiated for high priority, low barrier strategic goals.	 Examples of early projects: Supply Chain optimization: enterprise cost savings of >\$500k in consolidation of industry partners, leveraging for optimal contracts and updated equipment and robotics/navigation without capital expenditure. Geographic optimization of spine services: work paused due to Covid-19. Will restart as Covid-19 recovery continues.

Multi-Modal Spine | Action Priority Matrix

Review work done through Pain Strategy

Multi-discipline case conference

ED referrals to right location & right level of care



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Discussion

- Through this Institutional Action Project, I was able to engage key stakeholders and leaders and to drive consensus across organizational boundaries to develop teams, tools and methods to set strategy for our new integrated multidisciplinary SpineCare network.
- Medical College of Wisconsin Spine has undergone transformational change to be inclusive of the diversity of spine providers with further steps towards a collaborative holistic vision and mission.
- This sphere of influence impacted our ability to respond to Covid-19 in a nimble and effective way to solve access and staffing issues and to create market opportunities.
- -We leveraged Covid-19 to increase our virtual footprint leading to growth in referrals by 30% compared to pre-Covid.

Summary

- The new Medical College of Wisconsin Comprehensive Pain and Spine model of care will ensure that the right care is delivered to the right patient at the right time by the right provider.
- Growth will be strategic, innovative, and enterprisewide to enhance our current services, reduce duplication, increase efficiency and coststewardship.

Next Steps

- Continue to develop and nurture these new teams to influence continued growth and progress.
- Create a new academic model of care to include virtual with in-person visits.
- Demonstrate strategic impact and organizational effectiveness.

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