Workforce Strategies: Implementing a Triad Leadership Model

**Background**
- Safety and quality of patient care is dictated by the practice environment.
- Organizations with positive practice environments, characterized by healthy and respectful nurse-physician relationships, have been linked to improved quality outcomes.
- A dyad leadership model – pairing a nurse leader with a physician leader to leverage shared skills and expertise - is one proven strategy to improve clinical and operational outcomes.
- Historically, advanced practice providers (APPs) have not been included in this model.
- APPs have grown significantly in numbers over the past decade and are critical members of inpatient healthcare teams.

**Purpose**
The purpose of this initiative was to expand an existing, effective unit dyad leadership model to a triad model that included APPs.
- The triad model utilizes interprofessional collaboration to achieve measurable goals, which are tracked and trended on unit-based quality dashboards.

**Implementing a Triad Leadership Model**

**BUILDING A CULTURAL FOUNDATION OF APP INCLUSION** (2010-Present)
- Key Stakeholders:
  - CMO, CNO, Medical/Surgical Department Chiefs, Hospitalist Medical Director & Nursing Leadership
  - Hospital and physician leadership actively created and support an environment where APPs are valued, trusted, and their opinions respected.

**LEADERSHIP MODEL DEVELOPMENT AND PROGRESSION**
- *Creation of Dyad Model (2014)*
  - CMO/CNO convened key stakeholders to introduce dyad leadership into practice
  - Unit Nurse Director and Unit Physician Leader collaborate to identify key quality improvement initiatives that align with organizational strategic goals.
  - Dyads report outcome measures at hospital quarterly Dyad meeting and yearly organizational Quality and Safety Steering meeting.
- *Transition to Triad Model (2016-2017)*
  - Department Chief APP role expansion to serve as APP Unit Leaders
  - Department Chief APPs integrated into existing Dyad Model
- *Expansion of Triad Model (2017 to Present)*
  - APPs formally recognized as valued and integral members of hospital unit.
  - Individual APPs with demonstrated leadership qualities identified and appointed as APP Unit Leaders.
  - Meeting frequency increased to monthly providing the CMO and CNO with a forum to increase engagement and drive innovation.

**Results**
- Expanded APP Leadership Roles
  - New APP leadership roles established
  - APP Triad Unit Leader
  - Department Chief APP
  - Hospital Chief APP
- **Clinical Outcomes**
  - Improved patient flow by increasing discharge before noon rates resulting in improved patient satisfaction and reduced ED overcrowding by 26%.
  - Implemented same day discharges for planned total joint replacement (TJR) patients, reducing length of stay and associated costs with no readmissions
  - Reduced the time between point of care glucose testing and prandial breakfast insulin administration to < 30min.

**Conclusion**
The formalization and integration of the nurse-physician-advanced practice provider triad leadership model has successfully leveraged the existing knowledge, skill, and engagement of APP, nurse and physician leaders to advance patient outcomes.

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