Reprising The Triple Play

The Mystery of a One-off that Became a Staple

Over two years ago, PCDC took a nascent concept on the road to present at a conference. It was a response to a felt health center need and an approach to the “Triple Aim”. In its most embryonic form, the idea resonated with audiences and took on a life of its own. It grew from webinars and 60-minute presentations to a ninety-minute form, and then to three-hour interactive learning lab sessions and then into a full day learning event.

What once was one PowerPoint for 30 people turned into a full blown curriculum for a couple of hundred, a framework that took three pressing concerns of the “everyman practice” and turned them into discussions, exercises, tools and practice opportunities to develop their own responses. That this unexpected turn of events seems mysterious bears further exploration to understand why it succeeded and why it continues to engage audiences and its creators in advancing its life, which in essence is a shared, organic and continuous discovery of paths forward.

At its most basic the “Triple Play” took to heart that the “seeds of success” lie in each health center’s understanding that each practice is its own source of promising “best practices”. At its heart, the “Triple Play” sees the persistent practice problems as three addressable, durable challenges and that the number “three” was an easy to grasp easy to execute organizing principle.

The triple play is a transitional mechanism emphasizing that in order to meet the desired triple aim results (improving patient experience of care, improving the health of populations and reducing the per capita cost of healthcare) one must first control and manage the three elements of the triple play; process, performance and outcome. Process performance and outcomes in turn play out across three persistent and durable challenges for every practice; (1)Turbulence and constant change in a multi-initiative often conflicting multiple priorities environment; (2) Swimming in a *data rich information poor* (D.R.I.P.) context where intimacy with the nuance and power of information seems elusive, and lastly,(3) Sustainability where each practice finds that today’s solutions are static in a world that requires organic, evolving and dynamic approaches. In short practice have a lot to do, a lot of data to work with and have to find ways to keep everything going!

Peppered with practical and memorable aphorisms and catch phrases, the whole approach to this training model (another triple) is traction, absorption and retention (T.A.R.). By avoiding didactic and enlightenment approaches, the Triple Play focuses on interactively letting the work at hand teach us how to do our work, which is more a trade school model which translated simply means “learning into action”.

For each of the elements of the triple play there are organizing methods and perspectives that arise out of some practice issue or challenge. All too often the practice perspective is lost and, to the practice, it seems like everything driving activity is outside-in. Organizations learn to evolve internally to drive their own solutions which, because of this organic inside-out perspective, seem to build success and sustainability into the practice’s DNA as well as its activities and organization.

For example, an over-abundant continuous stream of initiatives produces “initiative fatigue” clouding the view for concrete alignment opportunities, which challenges practices. All these initiative nearly hold a mortgage on practice time and can even be considered counter productive distractions to the real business of practices. Compounding this complex situation is a never-ending sense that there is no clear “End State to Transformation” – or whether there is a defined progression of these initiatives so that there is a cumulative sense of building in the right direction. Combined, these two stressors can be demoralizing and debilitating, sapping a practice’s “adaptive reserve”. The problem extends to the initiative sources, which continue to demonstrate a lack of harmonization of standards and measures.

In response, the triple aim teaches “goal congruence”, “measure twice cut once” and that “workarounds are not workflows”. Practices learn to develop a high impact pathway that maximizes overlaps and alignments across the ponderous tidal wave of initiatives & standards which otherwise compromises their most precious resource “TIME”, and multiplies the results from every minute spent on alignments toward achieving multiple results or results that cover multiple initiatives.

In a multi-initiative turbulent high change environment the Triple play shows that Incremental fixing – attacking fraud, reducing errors, enforcing practice guidelines, implementing HIT, making patients better consumers, have created some marginal individual impact but **are not achieving integrated impact**. We show that what is needed and what could work is a critical mass impact of integrated initiatives. Incremental fixing is not transformative but could be if we integrate and point increments toward a tipping point. The “island of initiatives” condition is anti-sustainable.

Another addition to the arsenal of approaches to the continuous change, multi-initiative environment is an advancement of the notions of resilience and efficiency. The triple play aims practices at “Organizational Endurance Training” (O.E.T.) which, like any physical fitness training program, helps practices to build the “organization muscles” necessary to living with continuous change and turbulence which will undoubtedly be the context for healthcare for many years to come. The triple play helps aim practices at examining “Job Doability” – in essence decompressing the practices and all the elements of workload, load balancing, task distribution, and the differences between capability and capacity that contribute to making work-life sustainable – “Doable”. The Triple Play help practices focus on using the right data to measure the appropriate “change categories” to manage change. And finally the Triple Play gets practices to internalize that initiatives are about “turning projects into programs” in which inherently lies sustainability.

In the second of these Triple Play areas, practices are inherently data shy and technologically hesitant. Providers won’t use the data until it is proven trustworthy but the Triple Play shows that the data is not trustworthy until it is used. This small philosophical and conceptual reversal opens up the nuance and power of data. Where the Triple Aim shows the “silence of quality” in the data it opens up the ability for the data to believably speak. And the data is not only trustworthy because we learn to use it, but more because when we use it we become sensitized, in a healthcare sort of way, to “data hygiene”. Once that Triple Aim concept is appreciated and practiced it opens the door to clinical as well as practice operations improvements. At its core information technology is about precision and wherever precision is injected things get smaller. For example, organizationally, the way we treat scope of work changes and task distribution, changes with measurement and people sit in the right seats on the bus and do the right job which is often evidenced by certain categories of work getting pushed down to lower skills. Furthermore, the Triple Play shows that data and documentation have become two sides of the same coin, and once treated as such, improve accuracy of documentation and precision in measurement.

Lastly, but most importantly, the previous two thirds of the Triple Play build the foundation for sustainability,

knowing that static solutions of today are not viable and cannot address an environment where change is the order of the day. In the Triple Play framework, the practice and the environment are viewed as dynamic and evolving, that the future arrives every day, and that to address sustainability is to develop a continuous adaptive response (C.A.R.). Through that C.A.R., practices give birth to the most optimal pathways to change. Through Triple play principles organizations develop the self-awareness and internal capability to continually reinvent and thrive in an ever-changing landscape. And in most cases it boils down to a simple arithmetic approach where process, performance and sustainability are measured through an evaluative point system and through a time/cost measure to achieve a sustainability score on a sustainability index. Having that score assists practices to continuously manage, control and adapt by responding to a very simple and practical dashboard. If you can perform well the processes you have developed, you have a good chance of achieving sustainable outcomes.

The mystery of the Triple Play’s popularity is not so difficult to appreciate. Its point of view is the practice’s. Its perspective is a “trench perspective”, that place where all the decisions and measures turn into action, and, because the Triple Play deals with what’s top of mind and top of agenda for the “John Q. Average” practice. Managing multiple priorities and initiatives, mastering data and, through these, advancing sustainability makes the Triple Play a solution that says “how might we…” to every challenge every day.

The Triple Play continues to find audiences because audiences seek it out. The Triple play endures not only because it strikes a resonating note in the heart of every practice, but also because it deals with relevant challenges whose immediacy address the future simply, directly, substantively and sustainably. And this is so because it is continuously advanced by the audiences who help create it.