













America's Voice for Community Health Care



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The NACHC Mission

The National Association of Community Health Centers (NACHC) was founded in 1971 to promote efficient, high quality, comprehensive health care that is accessible, culturally and linguistically competent, community directed, and patient centered for all.



Radical Redesign to Improve Productivity and Reduce Cycle Times — A Case Study on Improving Patient Access

October 2020





Agenda

- Introducing our Speakers
- Wood River Health Services Overview
- Primary Challenges
- Five Steps to Operational Excellence
- WRHS Today





Community Health Centers ® Introducing our Speakers



Alison Croke **President & CEO Wood River Health Services**



Gabriel Del Muro Trainer, Coach Coleman Associates





NATIONAL ASSOCIATION OF Community Health Centers ® Wood River Health Services





NAL ASSOCIATION OF Primary Challenges ODG: ODG:

- Cycle time for patients = 51 minutes
- Patients per hour 1.5
- Capacity utilization -66-75%
- No same day appointments available being used in advance for follow-up visits
- Time to third next available appointment = 25 days for routine rechecks
- Providers taking charting home





5 Steps to Operational Excellence

- 1 Leverage outside expertise to support team.
- Break the schedule and simplify it.
- Redefine the care team and the workflow.
- Communicate results and wins.
- 5 Implement validation systems.





Leverage Outside Expertise

Engaged Coleman Associates to perform a Rapid DPITM







Break the Schedule









Stop trying to get patients to follow your schedule.

- ✓ Eliminate requirements to show up early
- ✓ Implement Simplified Patient Schedule (SPS)
- ✓ Jockey the Schedule
- ✓ Develop a culture of "Say Yes"
- ✓ Change Providers to "sheep" and Medical Assistants to "shepherds"







Ensure team-based care is truly team-based.

- ✓ Leverage organizational resources to solve organizational problems (e.g. staff in other departments support peak call times)
- ✓ Ensure the front office is part of the care team by increasing communication and collaboration between the front office and the back office (e.g. walkie talkie's, huddles)
- ✓ Shift team workflow from being provider driven.
- ✓ Find ways to change language and visual tools to shift the focus and responsibility from provider centric to team based.





Redesign the workflow to leverage the whole care team.

- ✓ Create a process ("Team Dance") that establishes roles and responsibilities and leverages tactics to keep everyone on track
 - ✓ MAs complete robust visit prep ahead of meeting
 - ✓ Care team huddles before the start of each day
 - ✓ MA ("shepherd") direct the team's workflow, providers ("sheep") follow MA's direction
 - ✓ MA transfers information to help provider set agenda (30 second report)
 - ✓ Care team "QuickStarts" appointments (for example, Medical Provider and MA, Behavioral Health Provider and MA)
 - ✓ Care team ensures the provider finishes documentation before moving to the next appointment



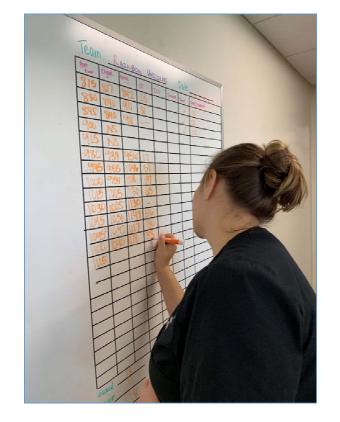




Communicate Results & Wins

Measure what matters.

- ✓ Implement highly visible, real time tracking of key results
- ✓ Communicate multiple times and multiple ways
 - Weekly road shows
 - Department meetings
 - Board meetings
 - Monthly all-staff
- ✓ Align with strategic objectives







Validate new behaviors – again and again and again

- ✓ Implement systems to validate daily, weekly, monthly and quarterly to keep focus
- ✓ Find ways to celebrate wins
- ✓ Identify ways to recognize 'what right looks like' to help hardwire new behaviors





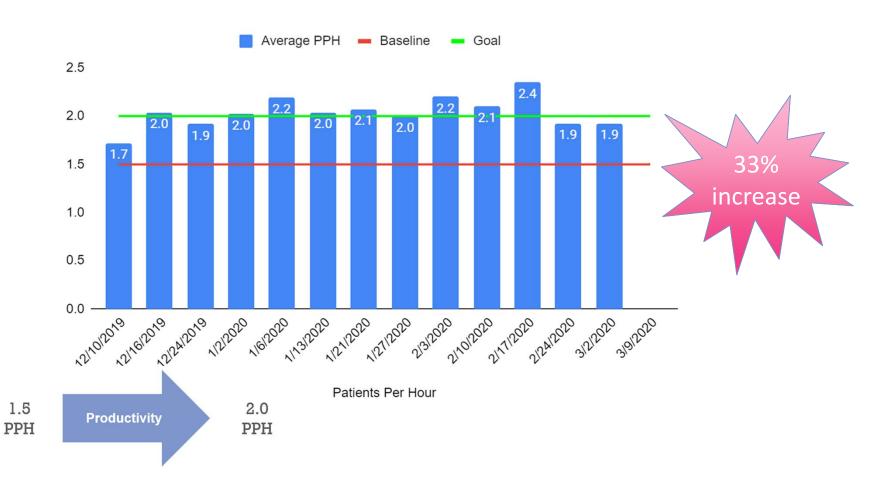
Pre-COVID-19 Cycle Time







Community Health Centers Pre-COVID-19 Patient Per Hour (PPH)







Pre-COVID-19 Soft-Landing

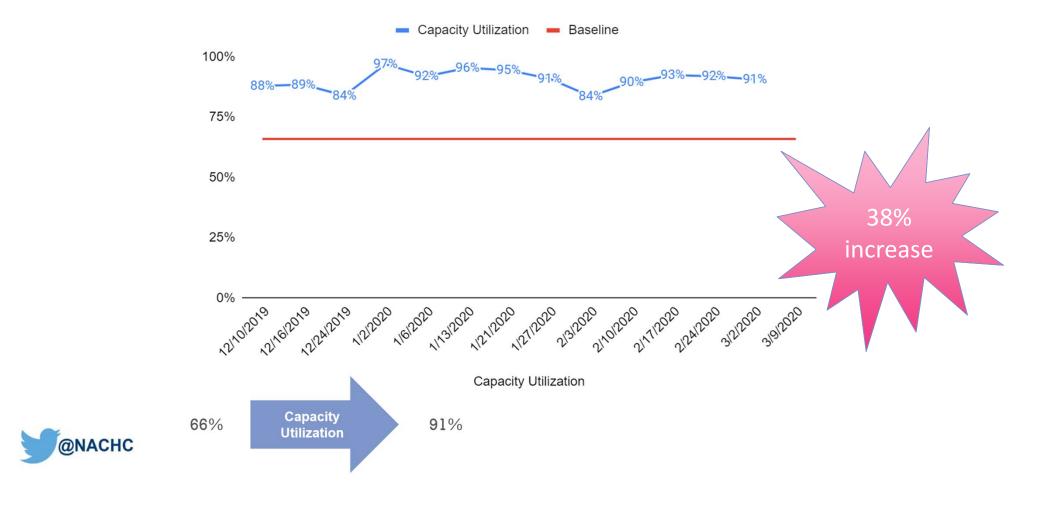






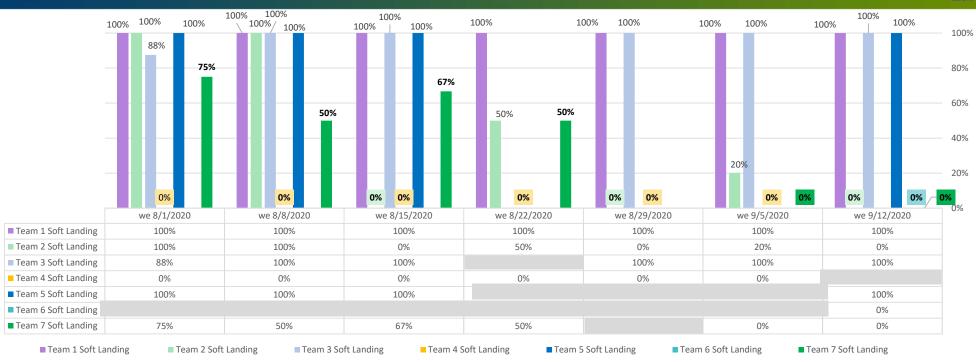


Community Health Centers Pre-COVID-19 Capacity Utilization



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Average Daily Soft Landing



Week ending 8/1 – 9/12

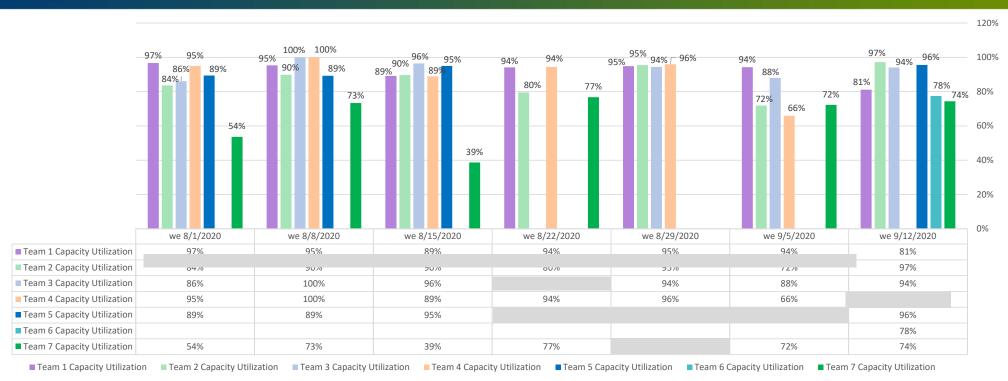
■ The overall average of the daily Soft-Landing goal was 58%.

Data as of 10/16/2020





Average Daily Capacity Utilization



■ The overall average of the daily Capacity Utilization goal was 86%.





Average Daily Cycle Time



■ The overall average of the daily Cycle Time (goal of 40 minutes or less) was 57%.



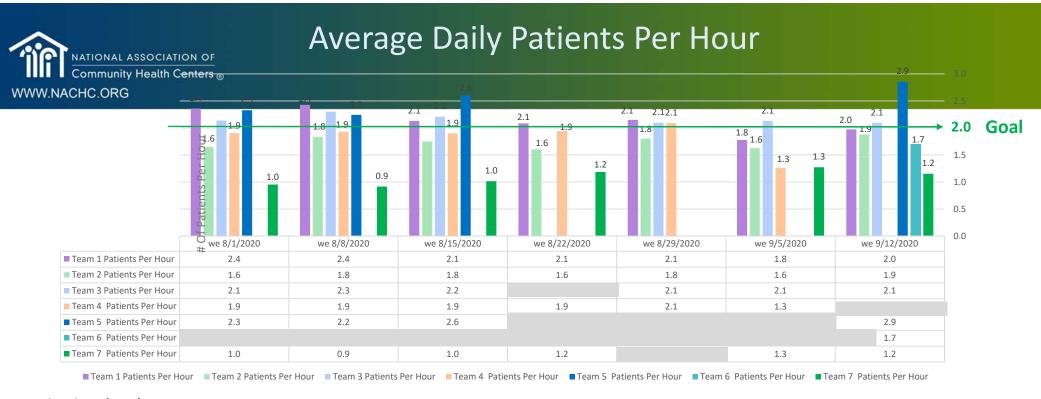
Average # Of Missed Opportunities Per Day





There was an overall average of 1 missed appointment opportunity





Week ending 8/1 - 9/12

NOTE: This data represents 7 weeks of data. Formula differs from Productivity report.

■ There was an overall average of 2 patients per hour. There has been no change since the last reporting period (6/22/2020 thru 8/15/2020).

* A definition of Patients Per Hour is available in the appendix.







