



Prioritizing Value – From Strategy to Implementation

October 21, 2020

Presenters:

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Session Objectives

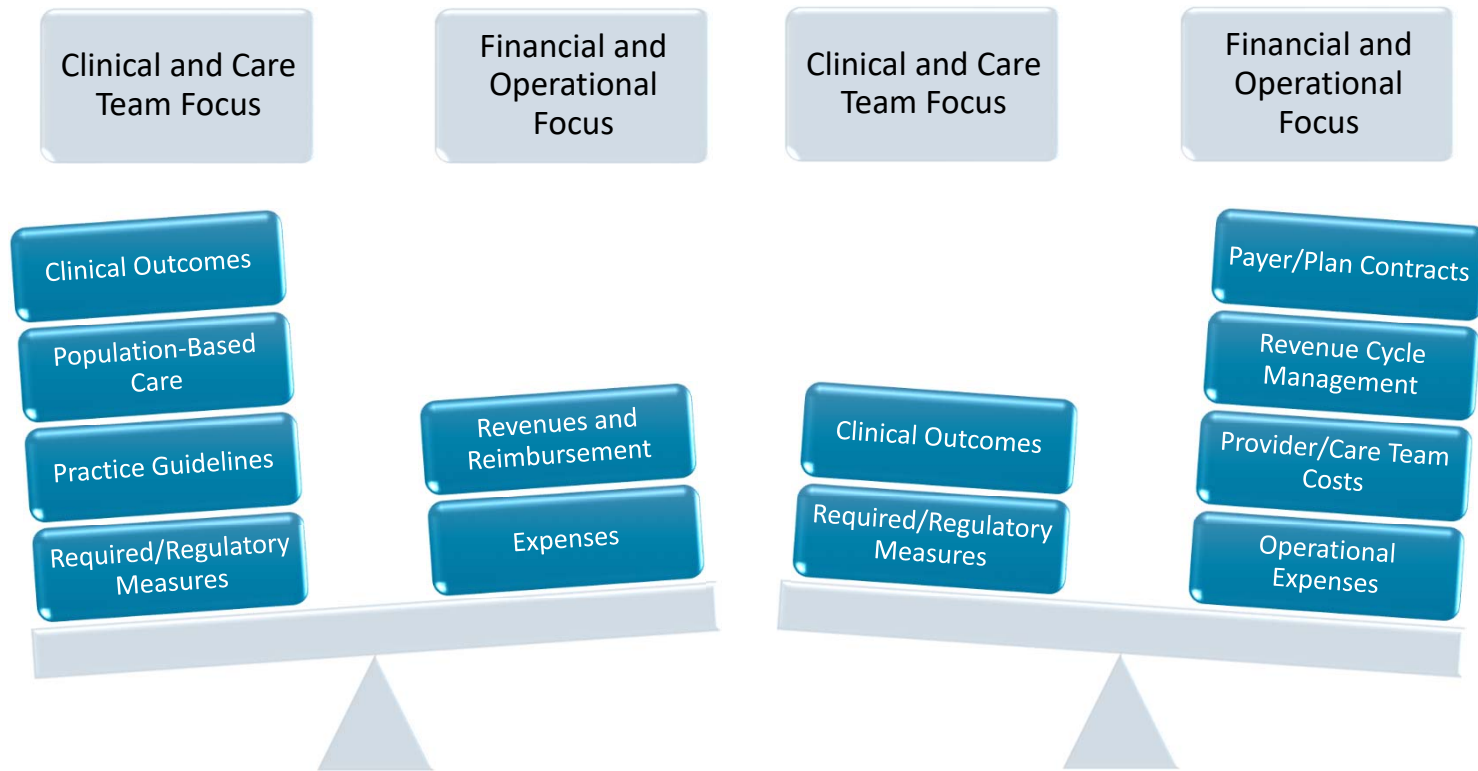
1. Understand how to link day-to-day activities to the organization's strategic plan and priorities to generate value for multiple stakeholders
2. Define comprehensive measures such as access, service, outcomes and cost to systematically track and demonstrate value
3. Create balance between high-quality clinic outcomes and financial/operational considerations

****Maintaining the focus on value is more important than ever as we pivot and realign strategies during and post-Pandemic****

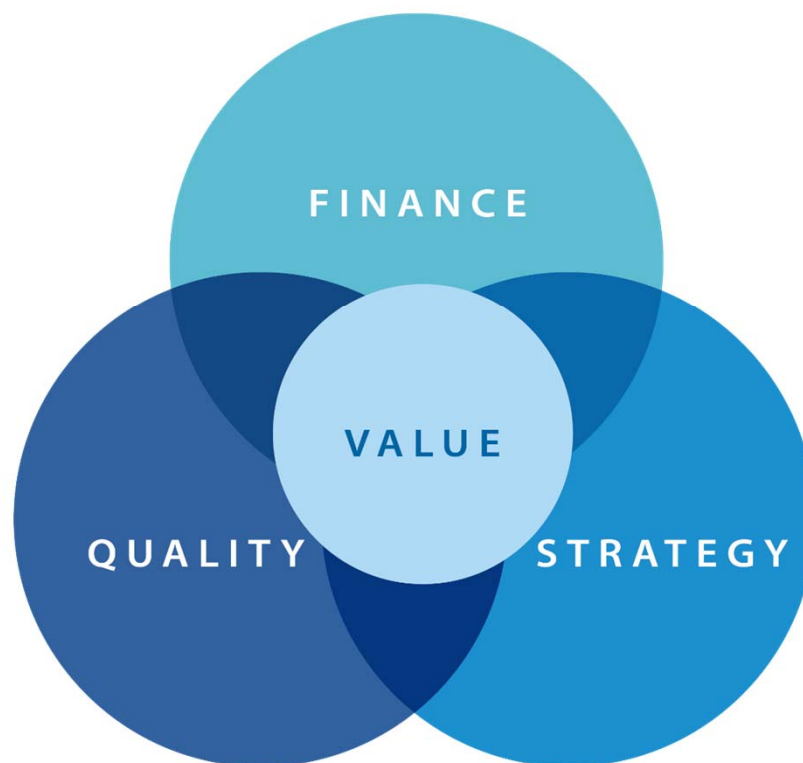
Agenda

- Share Lessons Learned from the *Making the Value Connection* (MVC) Program, Funded by the Cedars-Sinai Community Benefit Giving Office, for Los Angeles Based Community Clinics
- Using the Mission/Funding/Capacity/QI Value Framework to Assess Activities in the Context of Strategic Priorities and Maximizing Value
- Saban Community Clinic: Real World Example of How Concepts and Tools were Applied
- Apply the MVC Value Formula to Measure “Value” Systematically in Terms of Access, Service, Outcomes and Cost
- Saban Community Clinic: Real World Example of Strategic Realignment and Prioritizing Value During the Pandemic

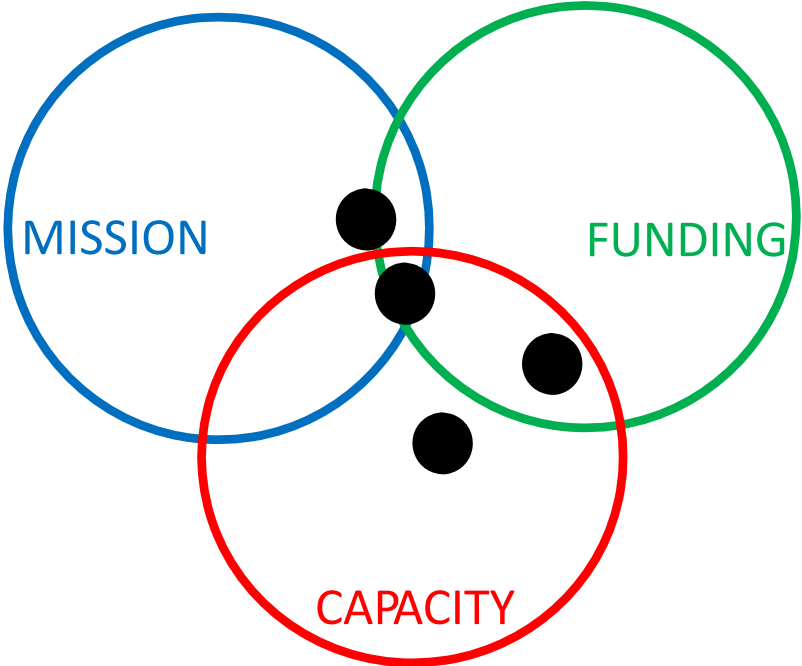
Delicate Balance of Perspectives on 'Value'



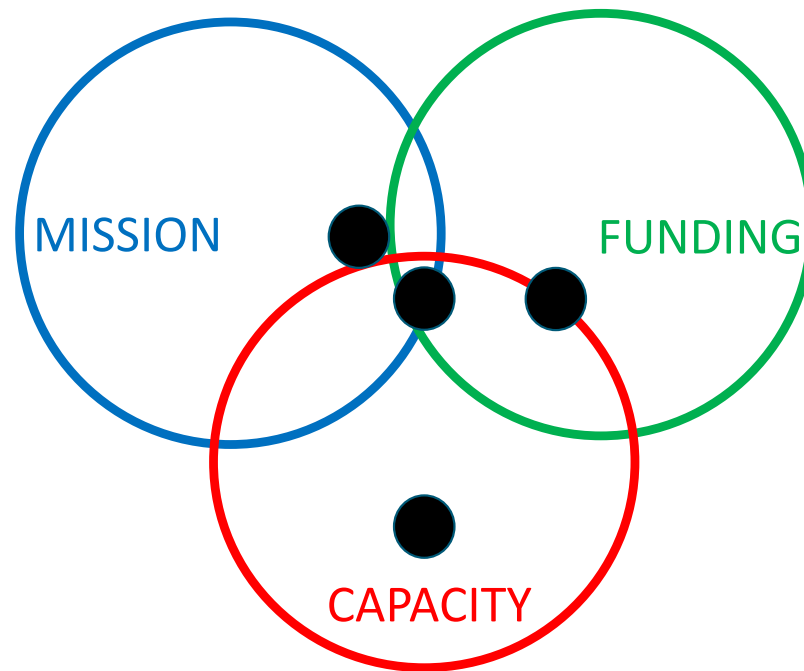
Making the Value Connection (MVC)



Determining Strategic Priorities



Determining Strategic Priorities w/QI-Value



Determining Strategic Priorities w/QI-Value



Strategic Goal	MISSION		Funding, Organizational Capacity, and Quality Improvement/Value-Based			
	2	Yes	1	the organization cannot consider under current circumstances		
	0	No	2	the organization may consider if additional resources are made available		
	1	Maybe	3	the organization may consider with appropriate resources and impact		
			4	the organization can consider with current resources and impact		
			5	the organization should begin addressing if not already in process		
	Mission		Funding	Capacity	QI-Value	Points
New Facility	2		3	4	3	12
Integrate Behavioral Health	2		4	3	5	14
Expansion Project	1		1	2	2	6
						0



Once Prioritized, Disseminate the Strategic Plan

- Define “value” for the organization and why it is important
- Stressing themes such as -
 - Community and patient impact
 - Efficiencies
 - Incentives/HRSA funding
 - Financial sustainability while meeting community needs
 - Patients have more choices
 - Opportunities for growth
 - Organizational reputation as a provider of choice



Short-Term Action Steps, Bearing in Mind the Covid-19 Reality



- Review your organization's strategic plan and how it aligns with financial, operational, and quality metrics and priorities.
 - *Are all of the key strategic areas defined, represented, and aligned?*
 - *Do any holes need to be addressed or clarified?*
 - *Should any priority be refined to speak (further) to value?*
- Prioritize key goals and objectives, using a systematic framework, as demonstrated
- Discuss how well your strategic plan/priorities are understood by various audiences and get the word out!
 - *What would frontline staff say are the key priorities for your health center?*
 - *Is there alignment or disconnect with leadership's desired direction?*
 - *Target specific audience and determine communication strategy*



SABAN
COMMUNITY
CLINIC

MVC – Defining and Communicating Strategic Priorities


Saban Community Clinic – Defining Strategic Priorities




2019-2020

Saban Community Clinic's Strategic Priorities

Saban Community Clinic has a Strategic Plan that guides our organization-wide decisions for three years (2017-2020). There are **5 main goals** of the plan, outlined below next to the graphics. This year, through 2020, we are highlighting some of the top priorities the organization is taking on to achieve our goals (explained inside the gold boxes).



WHOLE PERSON CARE
Engage in Whole Person Care (WPC) approach, integrating patients and community partners into population health management planning.



OPERATIONAL EFFICIENCY & TARGETED GROWTH
Provide the most needed and effective services for our clients leading to high quality patient outcomes through maximized operational efficiency & targeted growth.


PCMH Booster
This will be an 8-week coaching program to assess the current PCMH clinical model in order to improve on and reach clinical and operational goals.

Infectious Disease Clinic Expansion
Expanding the current Infectious Disease clinic to include care and treatment of more diseases on top of HIV & Hep C which are already treated here.

Homeless Program Expansion
Development of a standardized, comprehensive program for patients experiencing homelessness.

Pediatric & Pre-natal clinic expansion
The purpose of re-starting pre-natal services at Saban is to provide comprehensive care for patients and their families. This will allow patients to have pre-natal and pediatric care in the same locations!

Health Information Exchange (HIE)
HIE allows your medical records to follow you and be shared with any providers or hospitals you go to. This would be especially important in specialty referrals, hospital admissions or emergency room setting where your medical record information would be vital to receive the most appropriate and timely care or consultation.

 **SABAN** COMMUNITY CLINIC

2019-2020

Saban Community Clinic's Strategic Priorities

WELCOMING SPACES
Create facilities that embody a positive, welcoming experience for our patients while providing a state-of-the-art, efficient and appropriate space for staff.

Beverly Refresh
A light refresh, that is currently underway, will improve flow, function, and the building appearance in clinical care areas as well as employee workspaces.

Virgil Clinic Opening
New clinic opening on Virgil near Koreatown which will focus on the pediatric population.

FINANCIAL SYSTEMS
Create financial systems & models that maximize revenue & productivity, provide organizational stability, prepare for changes in the healthcare industry, & allow for innovation & expansion.

Affiliation Agreement with Private Providers
Explore affiliate partnerships between private providers and SCC, through a management service organization, to capitalize on SCC enhanced reimbursement rate. These private providers would operate as SCC satellite clinics but would maintain some independence.



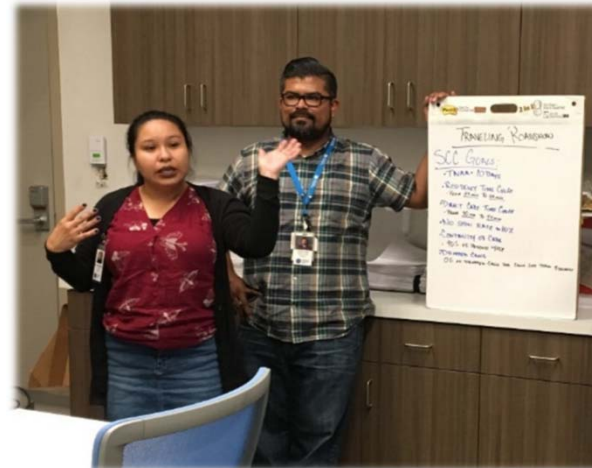
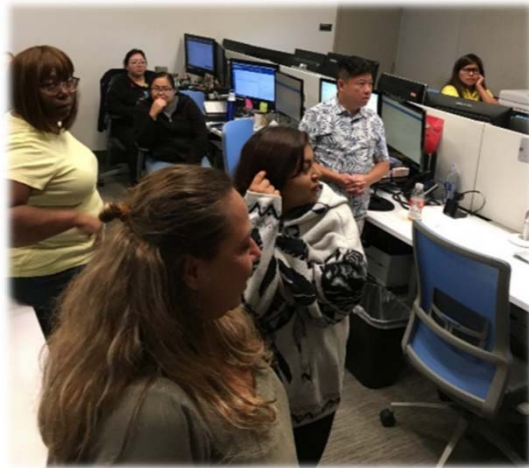
HUMAN CAPITAL
Invest in human capital - in staff, Board, and volunteers.

Volunteer Program
Enhance the patient experience and meaningful use of available technologies through the creation of in-clinic volunteer opportunities.

Employee Engagement
Internal work with Saban employees to enhance job satisfaction across all departments

 **SABAN** COMMUNITY CLINIC

Interactive Communication



Roadshow Technique

- Previously used to make in-person efforts to share quick, meaningful, informational points
- About 5 minutes for core information to share across multiple departments

Communication Lessons and Wins



Effective communication requires:

- Meeting in-person and being present
- Getting into the weeds of the work
- Pulling the **right** stakeholders
- Providing supportive deliverables
- Celebrating wins and milestones
- Obtaining interactive feedback
- Identifying clear **value** to stakeholders
- Encouraging opportunities for questions
- Repetition, repetition, and more repetition
- Continue to update post-implementation

A win can simply be... staff feedback!

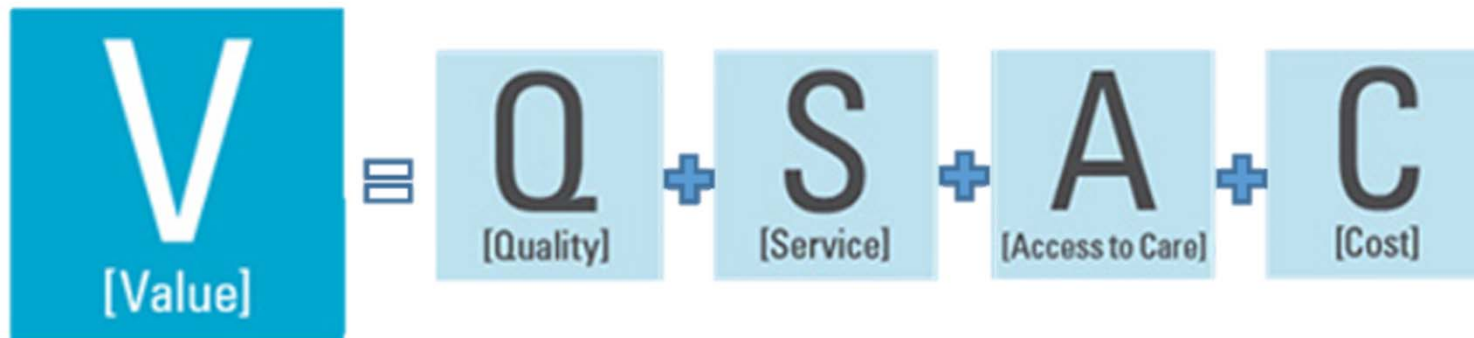
"You get used to doing things a certain way because you've done it that way for so long, so change is difficult. But once you start realizing how it makes your life easier and why you do it, you adopt change."

- SCC Case Manager

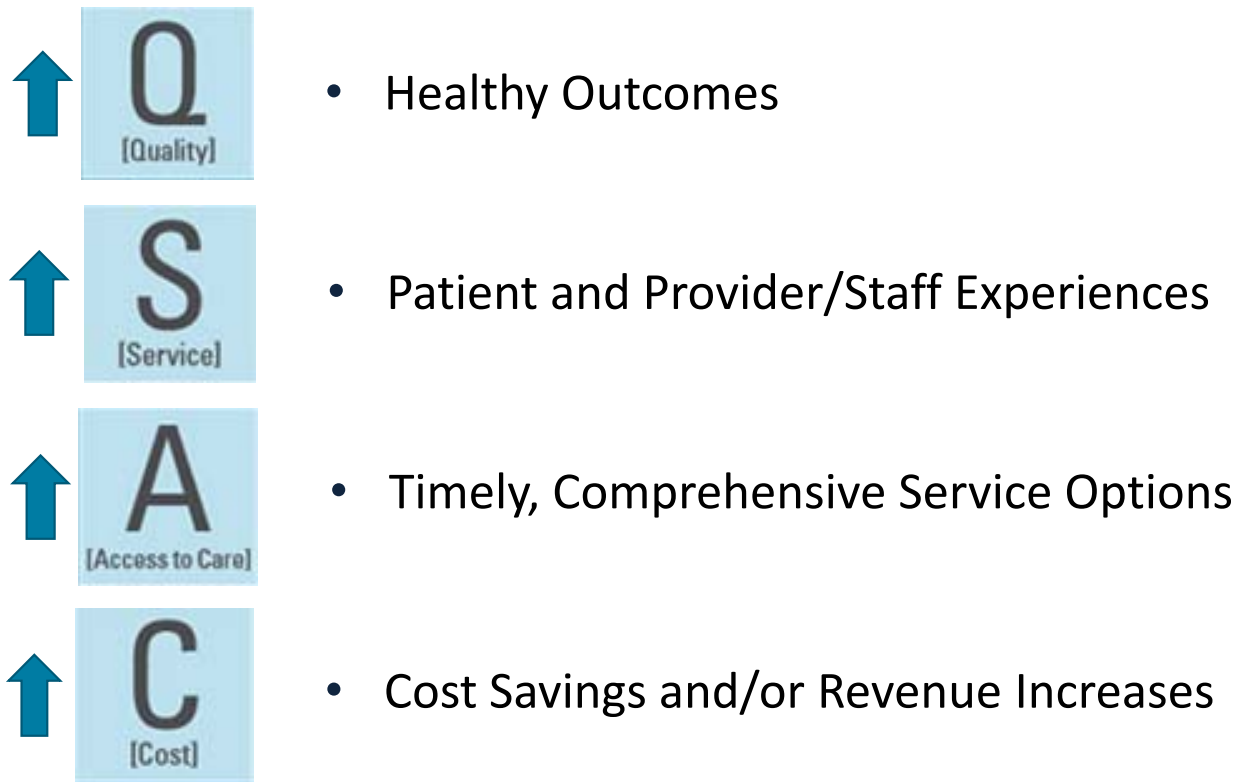


Defining Value – the MVC Value Equation

Defining “Relative” Value - MVC Value Equation



Defining “Relative” Value - MVC Value Equation





Factors and Considerations for Identifying **QUALITY** Measures



The **outcomes/improvements** that we hope to see for the patients we are serving:

- Patient Health Outcomes
- UDS and HEDIS Measures (standard quality metrics)
- Process or Intervention Metrics that point out how well the team is adopting the change and/or how current systems are functioning



Factors and Considerations for Identifying **SERVICE** Measures



Indicators that demonstrate that the **services** provided are patient-centered:

- Patient Experience and Satisfaction
- Provider/Staff Experience and Satisfaction
- Total number of visits, resources provided to the community



Factors and Considerations for Identifying **ACCESS** Measures



Measures that indicate that patients are getting the **timely access** to the care they need:

- Third next available appointment
- Cycle times/wait times
- Show rates
- Referral Completion
- % of patients with 1 or 2 visits (“active patients”)



Factors and Considerations for Identifying **COST** Measures



Note: It can be challenging to find the right “**Cost**” measure for a project – measures that are available, transparent/shareable, understood, aligned with community mission:

- Costs or Revenues per patient seen and/or scheduled
- Costs or Revenues per provider, team, FTE
- Costs or Revenues per visit – billable or not
- P4P/Quality Incentives
- Reimbursement Rates
- How Any/All Improvements Affect Organizational Margin and Goals: Value & Impact Statements

Considerations and Definitions



- When selecting measures for their MVC projects, they were encouraged to:
 - ✓ Identify linkages to the strategic plan/priority
 - ✓ Define the “Value” messaging geared to the specific stakeholder/staff/role – the WIIFM
 - ✓ Create opportunities to facilitate collaboration (between Quality, Finance, Care Teams, Operations, etc.)
 - ✓ Agree on measures that are easily gathered and **can be** shared with staff

Finding Connections to Maximize Value



Project: Improve the Completion of the Annual Wellness Visits for Medicare Patients

Value Indicators	Factors & Themes To Consider	Potential Measures of Impact
Quality	Are we maintaining or improving our patient/quality outcomes? Are we providing timely preventive screenings? Are we providing timely referrals for needed services?	<input type="checkbox"/> Annual wellness visits completion rates <input type="checkbox"/> CRC Screening <input type="checkbox"/> Flu vaccinations <input type="checkbox"/> Referrals for specialty services
Service	How much time patients are spending in the health center, or perhaps patient show rates. Patient satisfaction with access to services – interactions with staff	<input type="checkbox"/> Patient Satisfaction surveys (CAPHs questions) <input type="checkbox"/> No Show rates <input type="checkbox"/> Cycle Times
Access	Time to referrals for specialty consults – colonoscopy, cardiology, etc. Addressing additional needs – case management, transportation, translation services	<input type="checkbox"/> Referral scheduling rates <input type="checkbox"/> Successful transportation services <input type="checkbox"/> Case management rates – care coordination completion
Cost Savings or Revenue Increases	Incentive payments for patient satisfaction scores Reimbursement rates based on co-morbidities If we don't document the visit and the conditions in the EHR correction, won't be paid correctly.	<input type="checkbox"/> RAF scores for reimbursement rate <input type="checkbox"/> P4P incentive bonus <input type="checkbox"/> Cost/revenue per case worker scheduling

Example – Annual Wellness Visits for Medicare Patients



Documenting the Value of the MVC Project:

- **Quality:** Annual visit rates increased by >15% from the previous year;
- **Service:** Patients shared their appreciation of the health center's concerted efforts to get them the healthcare they need;
- **Access:** Through case management and transportation interventions, they connected patients to necessary services including transportation; and
- **Cost/Revenues:** Accurate documentation increased the RAF score, leading to 1) increased annual revenues by over \$160,000; and 2) more opportunities for additional pay for performance (P4P) dollars in 2020.



Project Overview and Aim Statement

By **Jan. 31, 2020**
Saban Community
Clinic will complete
the following
stages...

Stage 1: Assessment / Research
Stage 2: Testing (PDSA, pilots, etc.)
Stage 3: Process Design
Stage 4: Training

...in order to create
streamlined processes for
3 internal referrals:

- **Psychiatry (BH)**,
- **Nutrition**
- **Echocardiogram**

Why? To increase patient and staff satisfaction, improve the quality of our internal services, and increase clinic revenue.



Why Psychiatry, Nutrition, and Echocardiogram?

Initially, we decided to do **all** of the internal medical specialties – we have 13.
We realized that would be too many.

Scale Down Approach

Then we moved to **one per department** – Medical, Behavioral, and Dental.
Very different challenges in each; standardization would not be beneficial.

Focus on a smaller set

Finally, we decided to focus on **3** internal specialties in all of our organization, that were “low hanging fruit”:

- Weren't managed by multiple staff,
- Contained easy-to-track metrics
- Were in need of improvement efforts



Meet the MVC Team

Psychiatry Change Champs

BH Lead

Senior Executive Lead

Echocardiogram Change Champs

Nutrition Change Champ



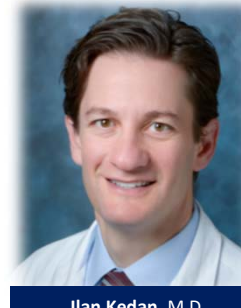
Sarah Domb, Psychiatrist



Julissa Miro-Quesada, Director of BH



Muriel Nouwezem, Interim CEO



**Ilan Kedan, M.D.,
IM/Cardiologist – Cedars Sinai and
SCC Volunteer**



**Malena Canjura, M.A. and
Echocardiogram Champ**



Melissa Artica, RD

Finance Lead

Project Manager

Project Support

Back Office Lead

**Chenelle Grooms, Case
Manager II**



**Joshua Rodriguez, Controller -
Accounting**



**Summer Masayeva,
Health Information Manager**



**Alexa Chande, Operations
Process Improvement
Specialist**



**Veronica Hall, Director of
Nursing**

MVC's Impact on FY 2019-20's Strategic Plan



Management Meeting on Strategic Plan- Dec. 18, 2019

Everyone had the opportunity to use a post-it note to ask what they need as a manager from their supervisor and what do they think their team need in order to make the priority successful.



At debriefing management expressed what to keep or change next time we meet to discuss the Strategic Plan.

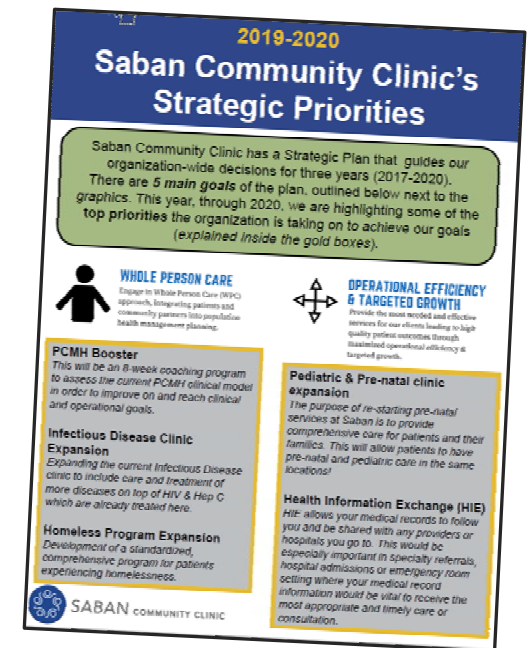
Keep	Change
<ul style="list-style-type: none"> food! ice breakers space post-it activity purpose/goals of priorities diff + dept present time keeping 1-pager 	<ul style="list-style-type: none"> more time for idea sharing 1-hour meeting Plan 1-2 mo ahead food menu share know who is leading priority

MVC's Impact on FY 2019-20's Strategic Plan



SCC's Strategy Department conducted an activity:

- Each team member reached out to 5 staff members to ask:
 - "What do you think the purpose of our strategic goals and our department are?"
- Collection of data led to the creation of a one-page sheet with simplified, tangible, and meaningful language to explain each goal
- Aims to help staff understand and identify what the organization's goals as a whole were, and how their roles help drive them



Current Strategic Goal Communication



Affiliation agreement:

The affiliation agreement exploration was terminated. Unfortunately, the payment arrangement proposed under the partnership raised our counsel level of comfort regarding Anti-Kickback statutes. We determined that the arrangement ultimately could not pass scrutiny from the Department of Healthcare Services and could expose SCC to significant financial risk.



Employee engagement: HR has offered daily raffles and snacks to on-site employees and a one-time gift to employees working from home. Several policies and space plans have been adjusted after receiving feedback from employees on telecommuting and work arrangement during the pandemic. The CEO & CMO have been sending regular email communications to all staff. A comprehensive employee engagement survey will be conducted next with a report out later this year.



Health Information Exchange (HIE) system: As of May 2020 Saban, has signed the contract to use LANES data. Our medical records staff are now able access to LANES data to confirm patients completed appointments & download the consult report to close the loop on an open referral. Clinical data exchange testing has been completed for sending & receiving patient data from/to EPIC. We need to train our providers to access & update patient care summary from Lanes to EPIC. Saban IT infrastructure is now ready for other HIE's in CA like eHealth Exchange, Care quality, Common Well Health Alliance.



Infectious Disease (ID) Clinic expansion: From September 2019 – June 2020, 117 patients received care in the ID Clinic, an increase of 42% from the previous 10 months. Kristian Melby, PA recently completed his Hepatitis certification and as a result, the ID Clinic is set to expand to Taper beginning 9/2/2020. Expansion to Taper will ensure more patients have access to HIV, Hepatitis, PrEP and PEP specialty care. Efforts to increase ID Clinic visibility are ongoing and include a billboard campaign currently running throughout the City of West Hollywood. Support services have increased as a result of a dedicated care team supported by LA County and will continue to expand through a collaborative partnership with *Being Alive*. The remainder of this year will focus on increasing the number of patients seen and building a comprehensive health model to ensure our ability to compete with other well-known ID providers in the community.



Pediatric clinic expansion:



In the first 6 months of 2020 alone, we have made significant expansions to the pediatrics program. In addition to adding 2 full-time pediatricians to the team, we also added new weekend and evening hours, and opened a new site at Virgil with a pediatrics focus. When at full capacity, the Virgil clinic will house a full-time pediatrician and a dedicated pediatric dentistry practice. In the second half of this year the focus will be on marketing the new clinic to its neighborhood and introducing the new pediatricians to our practice to draw in and grow our pediatric population.

Volunteer program: This priority is on hold due to the COVID pandemic.



Starting Off Our Project

- First step: conduct a formal **assessment** of current process, issues / inefficiencies

Psychiatry

- Large backlog of referrals
- High wait time between creation and scheduling

Nutrition

- High no-show rate
- Patients not understanding reason for referral

Echocardiogram

- Lack of referral closure
- Long waiting time to be scheduled (bottleneck)

- After that, we met with stakeholder(s) in each referral to identify solutions and start the change process → viable PDSAs, change ideas, and trainings.



Project Activities

Psychiatry

PDSA:

- Closing strategies to work down backlog
- Heavier use of EMR functions for documentation

Deliverables:

- Script for scheduling and explaining referral process

Nutrition

PDSA:

- Reminder phone calls
- Streamlined template with 30 min. slots
- No-show patient survey

Deliverables:

- Guide sheets on SmartPhrase documentation

Echocardiogram

PDSA:

- "Scrubbed" open referrals
- Streamlined template with 15 min. slots
- Prioritize uninsured patients

Deliverables :

- Script for scheduling and explaining referral process

Project Wins



Psychiatry

- Adopted similar workflow for Counseling and Case Management Referrals.
- Downward trend for Third Next Available Appointment.
 - New patient psych evals went from **69 days** to **41 days**.

Nutrition

- QI project engagement and enthusiasm from Registered Dietician.
- Positive correlation between Average A1C levels and Nutrition Services for DM patients.

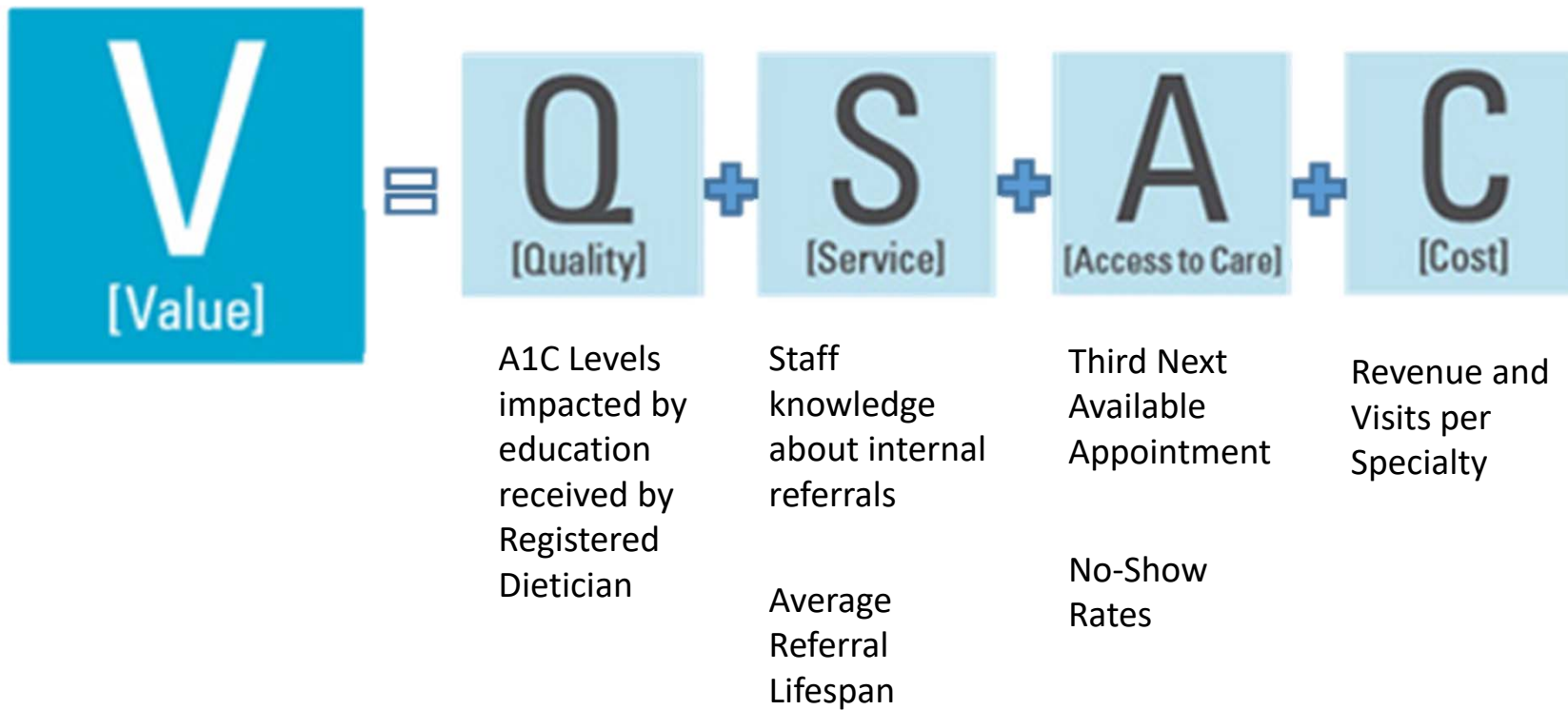
Echocardiogram

- Wait time for appointments went from **7 months** to **3.5 months**.
- A second cardiologist volunteer is being considered to assist.





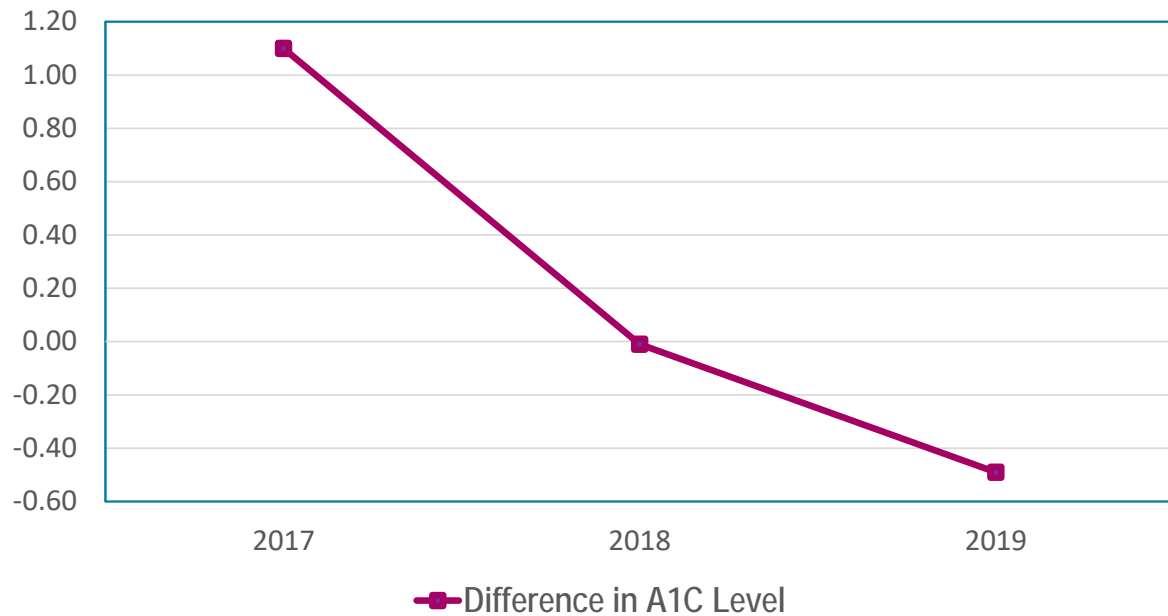
Project Measures



Quality Measure - Nutrition



Difference Between Average A1C after Connecting DM Patients to Nutrition (Two Visits)

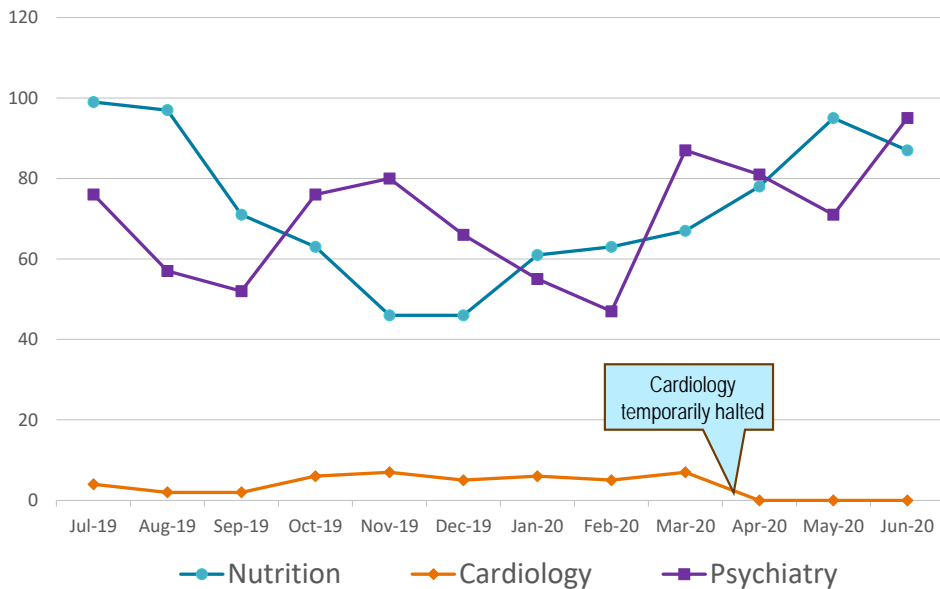


- While we can see a downward trend, we would like to look at trends in the future years, as well as compare with years prior to having out internal nutritionist.

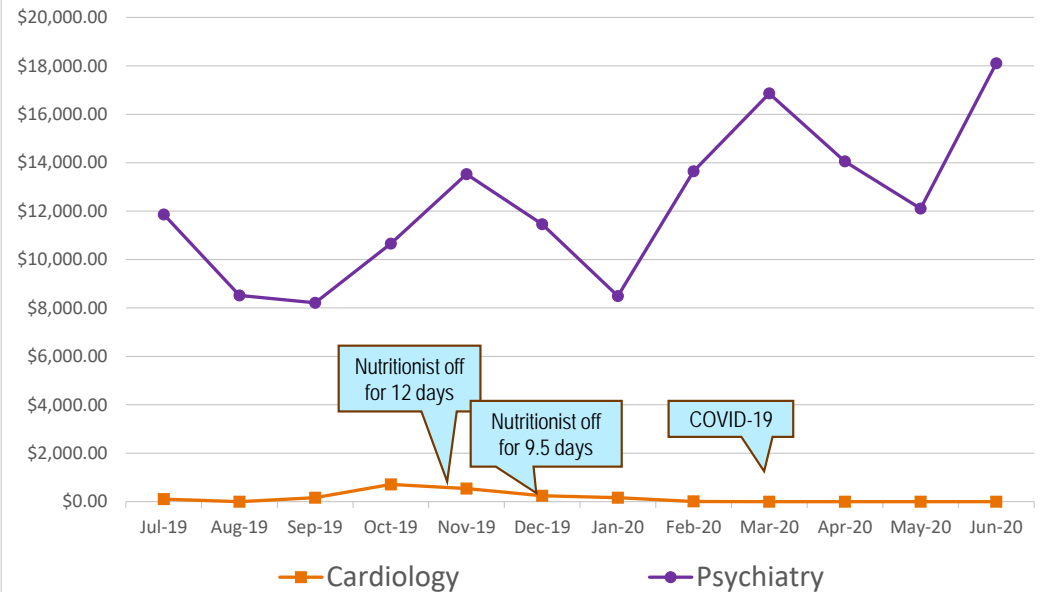


Cost Measure

Average Number of Visits Per Specialty



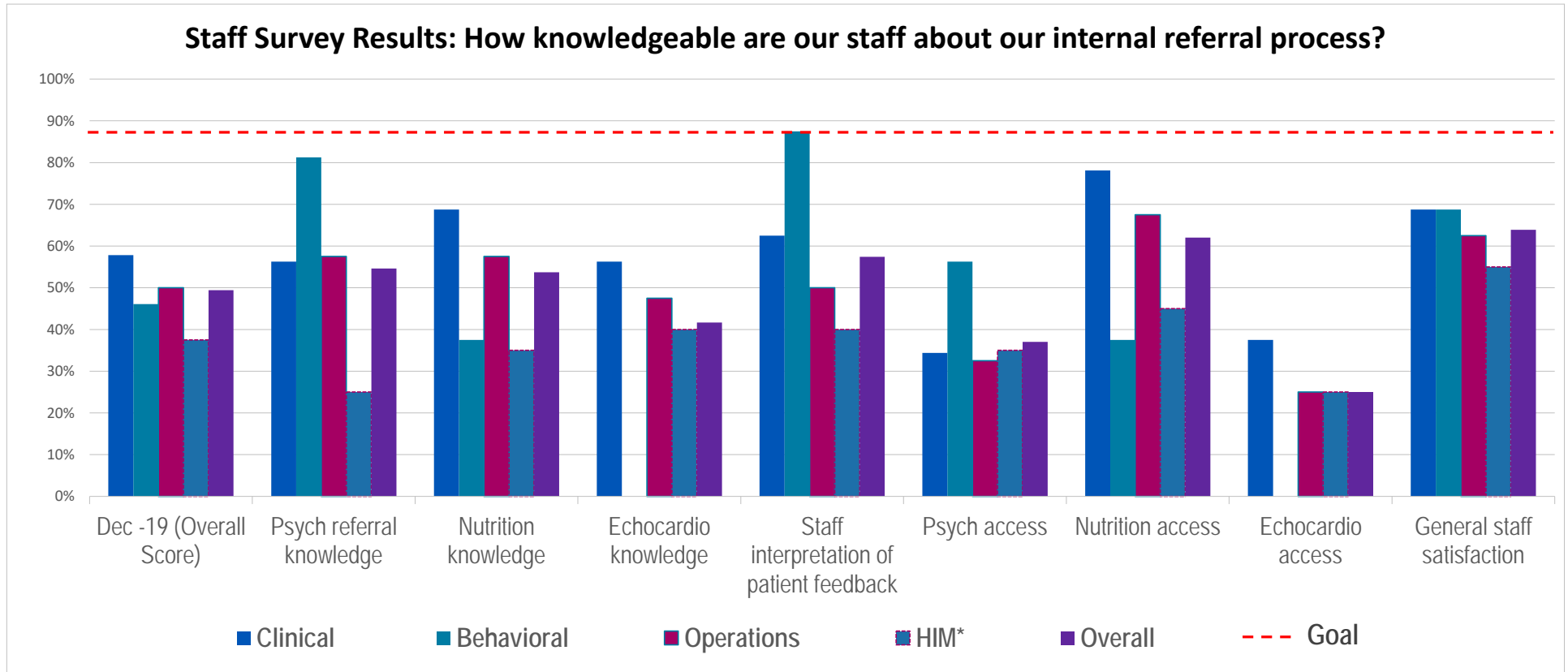
Average Revenue Per Specialty



- Long term data should show increases; potentially adding another volunteer cardiologist would increase more productivity and consequently increase revenue



Service Measure



...and then...Dual Pandemics Happened

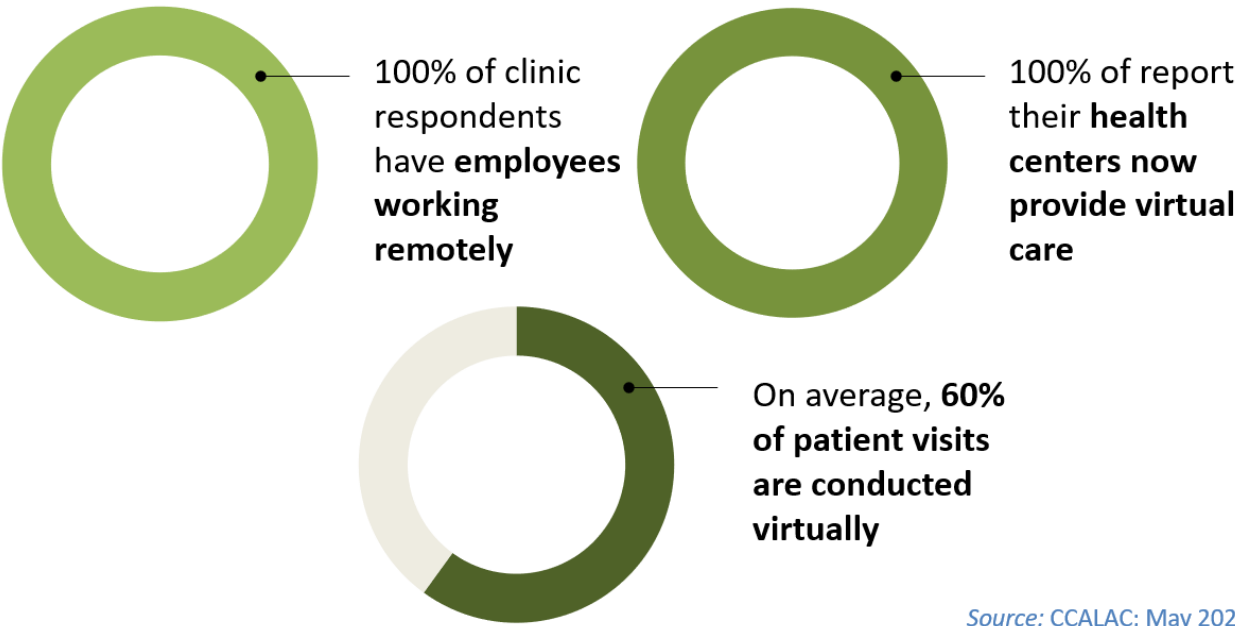


Beata Zawrzel - NurPhoto/Getty Images



Virtual is the new reality...

...but poses challenges with access to technology, equipment, internet, and adapting to new methods of communication



Source: CCALAC; May 2020

Source: CCALAC, May 2020

Extracted from 2020 QI Summit Series presentation, August 28, 2020 by – Gayle Northrop, IHQC faculty

Considerations for Strategic Realignment



- Confirming Guiding Principles – Mission, Priorities, Focus
- Consider Current Assets – logic modeling, asset mapping, etc.
- Consider Opportunities Along a Spectrum



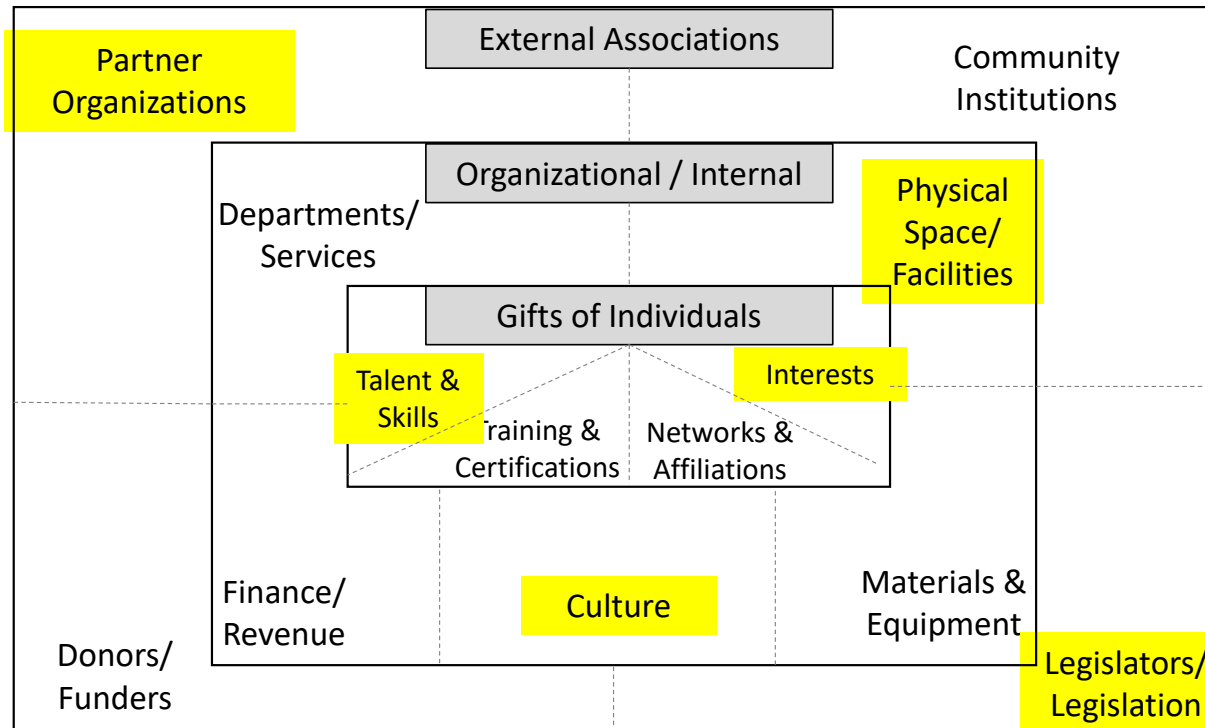
Source: Adapted from Connelly and York and Nonprofit Insurance Alliance

Saban Community Clinic – Strategic Realignment

- Strong Organizational Culture
- Leveraging Available Assets
- Shifting Operations & Rethinking Access
- Embracing Advocacy



Asset Mapping



Saban Community Clinic Case Example



Saban Community Clinic – Key Success Factors: partnerships



Saban Community Clinic – Lessons Learned and Future Outlook



- Communication
- Culture
- Staff Engagement
- Flexibility

Contact Us

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