#### **SNMHI Summit 2011**

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# Continuity: Why It Matters and How to Build It

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Session 1B March 7, 11:00 AM -12:30 PM





MacColl Institute at Group Health Cooperative

# About Multnomah County Health Department, East County Health Center

- FQHC located in Portland, OR
- ECHC see 41,600 patient visits per year
- MCHD total sees 166,000
- 37% of patients speak English
- 52% of patients speak Spanish
- >6000 well child visits/year
- 52% are <18 years old</li>



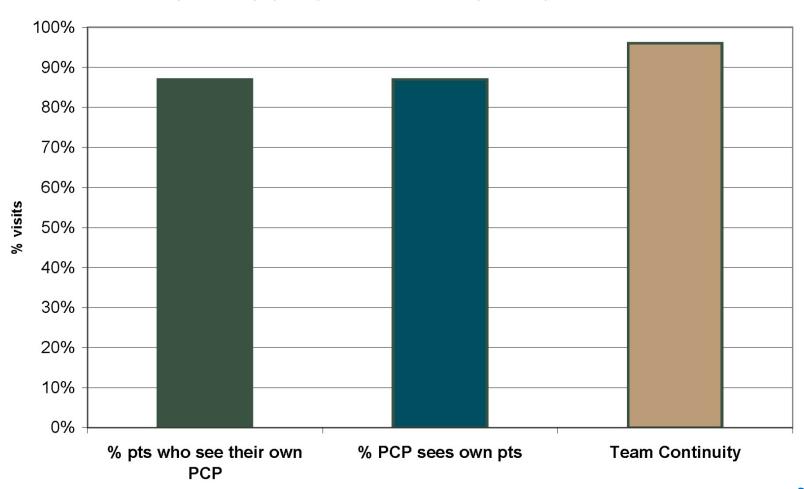
## Advanced Access Scheduling to Improve Continuity

Challenge: To Implement Advanced Access scheduling while maintaining gains made in continuity

## **Continuity: Current Status**

#### **Continuity - January 2011**

represents the proportion patients who see their own provider or provider team



## **Advanced Access Scheduling**

- Patients should see their team on the same or next day
- Included continuity policies in Advanced Access rollout package
- Maintained standard policy of scheduling with PCP or PCP team and allowed teams to problem solve access issues from that starting point

## Implementing Scheduling

- Developed a roll out plan with cross functional team including identifying same day ratios, scheduling policy, patient education, and continuity policies
- Developed a monitoring system for adjusting provider schedules and for following up with teams to ensure that they understood the new process

#### Results

Decreased 3<sup>rd</sup> next available appointment

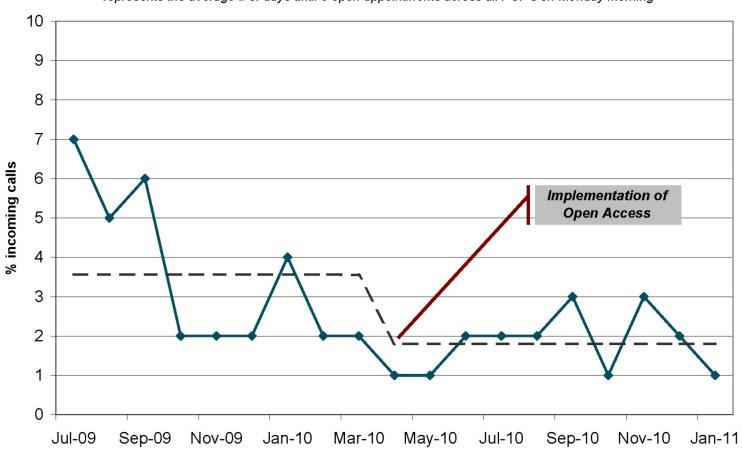
 Increased the % of patients getting in to see their PCP within 0-1 days

 Maintained team continuity at >90%; percent of the time patients see their own PCP

### 3<sup>rd</sup> Next Available

#### # Days until 3rd Next Available Appointment -**East County Health Center**

represents the average # of days until 3 open appointments across all PCP's on Monday morning



## **Impact of Continuity Changes**

Due to standardizing continuity policies and workflows, we were able to institute:

- Provider-Team dashboards to allow teams to monitor the progress of their population of patients over time
- A team-based care patient engagement survey to monitor patient perception of efficiency, patientcenteredness, and a variety of other factors
- Advanced Access without impacting continuity

## Impact of Continuity Changes, cont.

 Standardizing continuity first has allowed us to implement other components of the medical home – proactive outreach, care management, etc. which has lead to an improvement in patient outcomes.

#### **Lessons Learned**

- Standardizing continuity started to create accountability for the population at the team level
- Assigning patient data to a team has more impact if the team were the ones seeing the patients
- To implement continuity policies and workflows, the front office and the back office both must be involved and working together

#### **Lessons Learned**

- Our current focus is on rolling out a standard disease management program around diabetes and depression
  - Continuity allowed teams to know their patients easier risk stratification, identification of eligible patients for care management
  - Relationship with RN care manager on the team

### **Questions?**





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