

Presenter Disclosures

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**The following personal financial relationships
with commercial interests relevant to this
presentation existed during the past 12 months:**

“No relationships to disclose”

Ready to play team?

**While we warm up and wait for the “team”
to show up, grab your game sheet
and get ready to play.**

The Dream Team

How Team Dynamics Can Make
or Break the Game,
and Your Program

Norma Furlong, Family Nurse Practitioner
Carla Remeschatis, Health Educator



School-Based Health Center Program



Prevent. Promote. Protect.

Every team has a story.



Our History

- First clinic opened in 1986
- One clinic initially
- Funded by county general fund
- Primarily served clients who resided in the site school
- High school focus initially, middle school clinics opened in 1994
- Goal of reducing teen pregnancy rate added in 1989

Goals today

- Comprehensive care
- Mental health integration
- Open access to all school aged youth
- Clinical standards
- Community support & outreach
- Sustainability

"One man can be a crucial ingredient on a team, but one man cannot make a team."

Kareem Abdul-Jabbar

Rules of Conduct



Rules of the game

Negotiable vs. mandated

Teamwork is the **ability** to work together toward a common vision.
The **ability** to direct individual accomplishments toward an organizational goal.
It is the **fuel** that allows common people to attain uncommon results.

Players agree to team “rules”.

- Communication
- Standardized documentation
- Defined roles
- Quality improvement
- Clinic flow

Embracing problems as an opportunity to change

- Playing hard ball
- Playing one on one
- When is it time to take a time-out?
- Knowing when to call in the coaches

Who am I playing with?

- Know your “roster”
 - Define the team
 - Choose good players
 - Who really wants to play here?
 - How do you motivate the benchwarmer?
- Know your “plays”
 - Clinical standards
 - Clinical expectations
 - Clinic flow

Team Captain

- Motivate and inspire
- Develop team members
- Create an environment oriented to trust, open communication
- Encourage creativity, risk-taking, and constant improvement
- Strive for team consensus
- Find motivating factors for members

Team player

- Know the plays/roles
- Play at the top of the game
- Know when to call the coach
- Flexibility is critical
- Respect other's roles to reach goals

Coach

- Assess team needs
- Develop the drills
- Recognize team weaknesses/strengths
- Set the structure
- Direct game

Free agents



Free Agents

- Connect families to health care
- Relationship build with community partners
- Bring resources to team
- Build momentum and support for program
- Health education
- Engage families

Playing Outside the Boundaries

- Collaborations outside your school site.
 - Messaging depends on the messenger & the target audience
 - Clients as Recruiters
 - Ex-clients as return clients, with their school-aged child needing health care
- Alternative, charter, and community-based schools
- Finding the youth
- Community-based programs
- Recreation agencies

Partnerships

- Working with other youth service organizations to share our message & invite families to utilize our health centers.
- Law enforcement, especially school resource officers
- Culturally specific agencies
 - Personal Community Mapping: What specific connections do your team members have?

Who are your Packer Backers?

In league support:

- Oregon School Based Health Care Network
- Political environment
- School
- Community

Actively engaging Backers

Collecting stories from supporters.

Encouraging youth to tell their friends.

What will bring youth & families
through your doors?

Know thy Enemy

Community, as well as Principal support is essential.

When key stakeholders do not welcome your program, how do you approach this game?

The rules are different.

The goals are.... ?

How can your team win over the “opponent”?

Youth engagement

- Multnomah County Youth Commission
 - 45 Youth Advisory Committee for the City of Portland and Multnomah County on youth issues
 - Each year, MYC chooses projects to intentionally impact change.

MYC adopted SBHC as special project June 2008.

- Focus group feedback lead to attempts at clinic changes
- Input on marketing materials makes immediate impact.
- MYC youth share SBHC messaging on youth-hosted youth-focused local public radio station.
- Special Project: Health Center Awareness Week

Health Center Awareness Week

Teen initiated activity at SBHC high school.

Health focus for each day of the week, with messaging around school created by youth.

SBHC Open House during school lunch time.



Got Health?

Collaboration with another county SBHC program & youth social service agency to engage youth advisors, train peer educators & utilize youth council via Multnomah Youth Commission.

- Harness the power of youth to advocate for peers, and to peers.
- Youth input on marketing, rebranding and social networking of program.

Scoreboard

What does it **look** like to win?



Outreach Worker and Health Education measures

- Number of clients from non-SBHC schools for 08-09: 1,812
- Number of non-SBHC schools and community groups reached in 08-09: 166
- Number of adults Carla reached 08-09: ____
- Number of youth Carla reached 08-09: ____

Outreach Activities to Date 08-09

Topics by #
of Students

8th grade presentation	508
Back to School Night	400
Birth control	1,586
Community resources	40
Faculty meeting	4
Fitness/nutrition	47
Foster care	450
Girls' group	144
Hygiene	12
Latina group	56
Lesbian/Gay/Transgender	543
Other	524
Relationships	379
SBHC services	7,712
STARS	280
STDs/HIV	2,396
Total	15,101

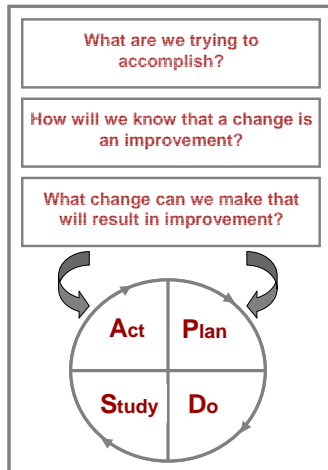
Dashboard measures

- Financial
- Access
- Clinical
- Payer mix
- How do you measure success?

Dashboard

ALL SBHC CLINICS	Jul 08	Aug 08	Sep 08	Oct 08	Nov 08	Dec 08	Jan 09	Feb 09	Mar 09	Apr 09	May 09	Jun 09	YTD Monthly Avg./Total	Target
Financial														
Billable visits													#DIV/0!	1,930
Billable visits/provider FTE													#DIV/0!	
Visit Revenue													#DIV/0!	
Revenue/Billable visit													#DIV/0!	
Direct Cost*													#DIV/0!	
Cost/ Billable visit													#DIV/0!	
Provider Work Days													#DIV/0!	
Billable Visits/ Provider Day													#DIV/0!	
Access														
# of medical visits per month	363	627	2104	2371	1810	1454	2252	2543	2101	2457			1524	
# of medical users last 12 mos	2686	5499	7419	7618	7739	7763	7857	7966	8034	8015			5883	
# of medical visits last 12 mos	8088	16572	21765	21700	21597	21363	21380	21579	21883	21976			16492	
# of visits per medical user	3.0	3.0	2.9	2.8	2.8	2.8	2.7	2.7	2.7	2.7			2.8	
# of new patients	102	313	516	427	360	246	372	504	312	313				
# of new pts-non-SBHC sites	52	157	182	154	140	90	153	210	148	152			144	
% of new pts-non-SBHC sites	51%	50%	35%	36%	39%	37%	41%	42%	47%	49%			0	
# of scheduled appts.	644	1190	2101	2350	1794	1668	2171	2290	2215	2584			1901	
% no-shows	32%	25%	24%	22%	25%	31%	25%	26%	27%	28%			27%	8%
% same-day appointments	23%	20%	29%	25%	26%	27%	28%	27%	28%	28%			26%	
% of appointments >4 days	57%	46%	42%	35%	48%	44%	41%	48%	52%	42%			46%	
Clinical/Quality														
Depression measure - coming soon														
% pts w persist asthma prescribed approp meds	71%	73%	70%	72%	67%	64%	70%	70%	74%	77%			#DIV/0!	50%
% of visits where meds were reconciled									48%	50%				
% of pts w/3 or more visits in last yr w/WCC in last 2 yrs							47%	49%	50%	50%			49%	65%
% of pts overweight/obese w diagnosis on enc or prob list									38%	38%			38%	50%
Payer Mix														
CareOregon - 26020	14.7%	16.0%	21.8%	21.8%	22.9%	22.1%	23.0%	23.7%	22.8%	22.6%			21.9%	
FFEP - 26130	8.9%	8.6%	5.4%	4.2%	4.6%	4.8%	5.2%	4.4%	4.3%	4.6%			5.1%	
DMAP Medicaid - 26030	17.8%	8.4%	10.4%	10.7%	10.6%	11.3%	10.6%	9.2%	10.2%	10.8%			10.3%	
Self-Pay - 40160	53.7%	43.9%	49.2%	52.4%	50.1%	50.9%	50.3%	49.8%	50.8%	52.3%			50.0%	
Third Party -40140	14.7%	23.1%	13.1%	10.9%	11.5%	10.7%	10.5%	12.7%	11.7%	9.8%			12.7%	

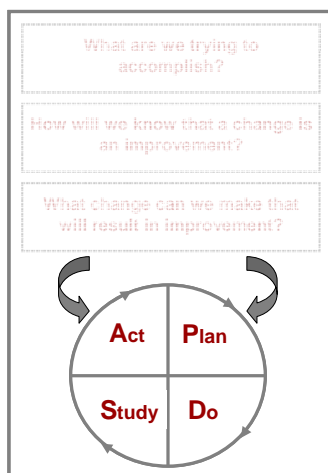
Model for Improvement



- Tool to guide improvement
 - Three fundamental questions
 - Testing and implementation

- Small scale \neq small change

PDSA



- Plan
 - Objective of the test
 - Make predictions
 - Make a plan (4 W's)
- Do
 - Carry out the plan
 - Record results and unexpected issues
- Study
 - Analyze the data
 - Compare to predictions
- Act
 - Decide on modifications and re-test

Plan Develop Study Assess

<p>Describe Project:</p> <p>Brief Description: What/How (include above- limit 2 sentences)</p> <p>Streline the flow of a clinic visit in order to eliminate inefficiencies and to add value to each visit.</p> <p>Boundaries: Cleveland SBHC</p>	<p>Objective: Streamline the steps within a typical clinic visit.</p> <p>Measure(s):</p> <ol style="list-style-type: none"> # steps in the process # places where rework occurs 	<p>Change Concepts (circle all that apply)</p> <p>Simplify</p> <p>Standardize</p> <p>Eliminate Waste</p> <p>Improve Work Flow</p> <p>Change the Work Environment</p> <p>Manage Time</p> <p>Focus on the Relationship</p> <p>Use Reminders</p> <p>Other</p>	<p>PDSA #1 6/2009</p> <p>Test having LPN review confidentiality and clinic services with patients and use smartphrase for documentation and communication with PCP. PCP reinforces confidentiality message but doesn't review content.</p> <p><i>Smart phrase: Clinic services reviewed:*** Confidentiality reviewed:*** Patient aware of services:***</i></p>
<p>Sponsor(s): Kristin Care</p> <p>Core Team Members: Norma Furlong Bill Aiken Linda Huth</p>	<p>Objective: Improve team communication</p> <p>Measure(s):</p> <ol style="list-style-type: none"> Team perception of improvement (letting go of steps, improved team communication) 		<p>PDSA #2 6/2009</p> <p>Test having Sr OA not check patients out until check out note is complete. Develop simple smartphrase for adding billing information.</p> <ul style="list-style-type: none"> Workflow: NP to tell client "stop at the front desk" Have all clients consistently stop at front SR OA doesn't let the client leave until the check out comments have been completed even if she has to interrupt the NP
			<p>PDSA #3</p>

Winning one game isn't enough.
We'll see your dream team at the championship!!

