

Improving “Perception of
Quality” for UofL GI

Need to do URGENTLY

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Protect your Reputation

Protecting Reputation

- More people go for medical advice in the web than go to visit health professional.
- 73% of Internet searches are “Health related”
 - 25% of persons with income \geq 75K search information about their health providers.
 - 10% of persons with income \leq 30K search information about their health providers.
- 59% of responders changed physicians due to poor reviews.

Protecting Your Reputation

Physician Rating Services

- 11.6 million visits a month to “Physician Rating Sites”:
 - HealthGrades.com,
 - Vitals.com,
 - Wellness.com,
 - RateMDs.com,
 - Ucomparehealthcare.com, as well as
 - Angieslist and Google

Protecting Your Reputation

Physician Rating Services

- **Reclaim your “Online Rating Profile” in ALL 5 of them (required by Department)**
 - correct all errors (Medical school, Residence, Fellowship(s), Board Certification(s))
 - add picture (Department or ULP should give each of us “digital picture” file),
 - add areas of expertise (all clinical areas + procedures done by your GROUP)
 - add ALL Hospitals (your quality is linked to your “best rated” Hospital),
 - Correct: Name (with “also known as”), Address, Phone, Website
- **Designated Office Person to look at Rating Websites every week, to find negative postings.**
- **Answer complains immediately with empathy and emphasis in improvement**

Protecting Your Reputation

Stop complaints before they reach a Physician Rating Service

- Use Automated “care calls” for early resolution of patient’s problems and to improve satisfaction.
 - Request “patient’s comments” from satisfied ones, to be placed in those websites to dilute negative comments;
 - people only look at the last 3 months if there are many answers (capture good reviews from in-office or automated “care call” answers).
- iPad on stand with “satisfaction questionnaire” at exit time (to catch bad reviews early and address them).
 - No more than 10 questions.

Improving your “visibility”

- 5 of top 10 searches are GI:
 - GERD, Hemorrhoids, Diarrhea, Heartburn, Celiac Disease
 - Include all in our profile (you will be found more often).
- Include ALL Procedures done by your Group
- Add your name to all “Find a doctor” services in the Hospitals you work;
 - add picture and
 - correct all information.

Current Rating Parameters by Web Rating Agencies

(HealthGrades.com, Vitals.com, Wellness.com, RateMDs.com, Ucomparehealthcare.com)

- Office:
 - Easy of scheduling urgent appointments
 - Pass call to RN who will facilitate
 - Office environment, cleanliness, comfort, etc
 - Smiling faces, current reading material in good shape, music or “neutral TV”, clean sitting and room with inviting decoration, deodorize waiting room.
 - Staff friendliness and courteousness
 - Train them in “assistance with an smile” and fire those who do not improve
 - Total wait time (waiting + exam rooms) ≤ 15 minutes
 - Proper scheduling to shorten waiting time (ours is terrible due to unrealistic schedule timing)
 - Look at 6 months data for average number of new and of established patients for each of us, and for usual “ending time”. Assign 1.5 or 1.75 factor to new patients and 1 to establish patients. Then divide total clinic time by number of corrected units and MODIFY SCHEDULE TO REALISTIC TIMES based on the data (for each one of us)
- **PATIENTS DO NOT PERCEIVE THE QUALITY OF CARE BUT THEY PERCEIVE THE EXPERIENCE**

Current Rating Parameters by Web Rating Agencies

(HealthGrades.com, Vitals.com, Wellness.com, RateMDs.com, Ucomparehealthcare.com)

- Physician:

- Bedside manners,
- Promptness,
- Accurate diagnosis,
- Follows up after visit

- **PATIENTS DO NOT PERCEIVE THE QUALITY OF CARE BUT THEY PERCEIVE THE EXPERIENCE**

Improve Patient's Access, Office Efficiency, and Your
Quality Measures – **USING THE PORTAL**

Consumer Assessment of Healthcare Providers and Systems (CAHPS) (New for 2015)

- **Getting Timely Appointments,**
- **Getting timely Care, and**
- **Getting timely Information**
- **How Well Providers Communicate With Patients** (same day answers)
- **Providers' Use of Information to Coordinate Patient Care**
- **Helpful, Courteous, and Respectful Office Staff**
- **Patients' Rating of the Provider**
 - **Answers Choices:** Never, Sometimes, Usually, Always

Why use EHR Portal to communicate with patients

- Facilitates Excellence in CAHPS and improves patient satisfaction.
- 90% of adults that use the internet would like to communicate with their physicians online (USE THE PORTAL)
 - You will not be overwhelmed: 2/3 of messages “to the doctor” should be answered by MAs or other health extender and should not arrive to you.
- 94% describe “easy access to medical record” as important or very important.
 - 84% would fill their medical questionnaires online, if they could (allergies, immunizations, current meds, directed ROS, PMFS Hx, last EGD, last colonoscopy)
 - 77% of patients would like to contact their physician online when visit is not needed.
 - 71% would like to schedule appointments online.
 - 71% would like to request refills online.
 - 70% would like to receive test results online (PORTAL ACCESS ALSO FOR OPEN ACCESS ENDOSCOPY)
- 56% would choose MD in part based in ability to communicate online.
- Ask if ALLSCRIPTS has “handheld application”, and use it.

How to Promote Website Portal

- Website address and Portal Information in all:
 - Stationary, appointment cards, bills/ patient statements, education material.
 - Informational Posters and Flyers in Front Desk, Waiting Rooms, Exam Rooms
- Give printed detailed, step by step instructions, to create Portal account
 - use pictures of each computer screen, page by page.
- Post same “step by step” information online in your Website.
- Collect email addresses in Clinic and Endoscopy.
- **Have computer Kiosk in Clinic Waiting Room and Endoscopy, and have staff help patients to sign-in on the Portal**
- Ideally, “open access” endoscopy patients should also get access to the portal, to receive results.
- Develop Metrics: how many sign up, what they use, etc

Consumer Assessment of Healthcare Providers and Systems (CAHPS) – 2015

Items affected by Portal are in dark letters

- **TIMELY CARE AND INFORMATION**

- Q6 Patient got **appointment for urgent care as soon as needed**
- Q8 Patient got **appointment for non-urgent care as soon as needed**
- Q10 Patient **got answer to medical question the same day** he/she phoned provider's office
 - Never
 - Sometimes
 - Usually
 - Always

Consumer Assessment of Healthcare Providers and Systems (CAHPS) – Items affected by Portal are in dark letters

- **COORDINATE CARE**
- Q13 Provider **knew important information about patient's medical history** (Accurate Current meds, ROS and PMFS Hx entered by patient through the portal)
- Q17 Someone from provider's **office followed up with patient to give results** of blood test, x-ray, or other test (Results reported by Portal; follow up automated call do find “problems”)
- Q20 Someone from provider's office talked about all prescription medications being taken (answer medication questions by Portal)
 - Never
 - Sometimes
 - Usually
 - Always

Consumer Assessment of Healthcare Providers and Systems (CAHPS) – NOT Affected by Portal

- **COMMUNICATION** (Allscripts is a barrier; scribes are better)
- Q11 Provider explained things in a way that was easy to understand
- Q12 Provider listened carefully to patient
- Q14 Provider showed respect for what patient had to say
- Q15 Provider spent enough time with patient
 - Never
 - Sometimes
 - Usually
 - Always

Consumer Assessment of Healthcare Providers and Systems (CAHPS) – Items affected by Portal are in dark letters

- **HELPFUL, CORTEOUS AND RESPECTFUL OFFICE STAFF**
- Q21 Clerks and receptionists **helpful** (questions answered quickly by portal)
- Q22 Clerks and receptionists courteous and respectful
 - Never
 - Sometimes
 - Usually
 - Always
- **PROVIDER RATING**
- Q23 Using any number from 0 to 10, where 0 is the worst doctor possible and 10 is the best doctor possible, what number would you use to rate this doctor? 0 – 10

WebPractice (through the Portal)

How can help the patient and you

- **Pre-Register and complete paperwork from home to improve office flow and accuracy**
 - Sign all clinic forms online, or print + mail (consent to treat, privacy notice, consent to appeal)
 - Clinical data: Allergies, Current meds and doses, Directed ROS, Directed PMFS Hx, last EGD and Colonoscopy, recent hospitalizations.
 - Monique Long informed me that there is a plan to implement this. **Will needed process for MD to detect what changed from last visit.**
- **Request prescription refills and medical records.**
- **Inquire about upcoming appointments.**
- **Schedule, Cancel, and Reschedule appointments.**
- **Review accounts and print statements.**

WebPractice (through the Portal)

How can help the patient and you

- Use Allscripts Follow my Health to facilitate entering before first visit:
 - Medication list,
 - GI directed ROS,
 - GI directed PMFS Hx.
- Send reminder few days before appointment, asking patient to update information with emphasis in:
 - Discontinued meds,
 - New meds,
 - Meds with changed dosing,
 - Hospitalizations since last visit,
 - Procedures since last visit.

Improving Perception of Quality

Automated “post encounter care” PHONE CALL

- “Hello, this is Doctor.... From UofL GI. I am calling to check up on you and to be sure your needs are being met.”
 - Did you understand the instructions given by the clinical Staff? (Y/N)
 - Did you have any problems getting new prescriptions? (Y/N)
 - Did you have any problems getting your tests, procedures or consultations to other physician or services (dietitian) scheduled? (Y/N)
 - Were you satisfied with the visit to our clinic? (Y/N)
 - Have you already signed on to the PORTAL (if NOT, ULP staff should call to help the setting up with phone guidance)
- Response driven alerts. ALL “NO” ANSWERS FOLLOWED BY A CALL to resolve issue.
- Provider Dashboard to access new alerts (those with problems)
- Timely staff response for Issue Resolution (only surveys showing problems will be addressed by the Staff); all other data collected to show “quality”
- Cheapest and most effective way to improve satisfaction; also to improve compliance.
- Implement Voice by CipherHealth Shaan Lemerise: slemerise@cipherhealth.com

Preserving and Growing Human Capital

Make your Staff your “best face”

- With Employee departures you loose “human capital” due to need to train a new person that will improve skills slowly; productivity decreases dramatically.
 - Give adequate wages not to loose workers.
 - Good training to avoid losses from braking rules due to ignorance.
 - Try to retrain at least once underperformers in lower 10% (fire only if this fails).
- Establish position expectations before hiring
 - Recruit to acquire talent
- Link talent acquisition to position description
- Train to optimize most (80%) – Train to promote the best (upper 10%)
- Establish benchmarks that are monitored
 - Number of patients prepared for clinic per half day, number of “tasks” resolved per day, number of calls answered per day, quality of interaction with patients, number of vaccines given, number of prescriptions pre-approved, number of patients called
- Give Regular feedback

Example of Position Expectations for MAs

(They are your face of Quality)

- 1. Always smile to the patient
- 2. Always be helpful to the patient
- 3. Be respectful and courteous to all patients
- 4. Be a good team member: always help other MAs to bring patients rapidly to exam room (goal: < 7 min waiting outside and < 8 min waiting inside);
 - Example: If patient waiting 5 minutes outside and other MA is busy, or there is no exam room ready due to patient waiting for vaccine or other, vaccinate patient and bring new patient.
 - Write in board time of arrival of patient to room (helps MD to know who is next)
 - Increase number of Triage rooms and triage MAs to accelerate flow of patients to exam rooms.
- 5. Be efficient completing clinical tasks to expected number (use score to compare work):
 - Example: 2 points to bring patient to exam room, 1 point for vaccinating a patient, 1 point for resolving “computer task”, 2 points for pre-authorization, ...). MAs will be graded by number of tasks done by half-day, and by courteousness, helpfulness and respect to patient. Points lost for not being a good team member. Goal: 35 points per half day.
 - MAs in lower 10% will be retrained and placed in advice to improve. MAs in upper 10% should receive raises or promotion. (if clinic works very well, the “at risk” condition of the lower 10% will be diminished; there will always be a lower 10%).
- **SUPERVISING STAFF SHOULD USE POSITIVE REINFORCEMENT TO IMPROVE PERFORMANCE**

Improving Perception of Quality

- Similar job descriptions can be made for Telephone answering team (give greeting with friendly/happy voice; be courteous and respectful; be helpful, answer X number of call per half day, ...), Managers, etc

Quality Questionnaire (example) or use CAHPS

(Twice a year with > 20% answer rate before changing process; we could add 3 more questions)

- Basic Points of Assessment:
 - I feel very confident about the care given by my physician or provider
 - The Staff worked very well to take care of my medical problem
 - My physician or provider showed interest and answered my questions and concerns.
 - My physician or provider listened carefully
 - My physician or provider was friendly and courteous.
- With only 4-choice answers:
 - Strongly disagree, Disagree, Agree, Strongly agree.
- At least 2 “open ended” questions:
 - Would you recommend this practice to a relative or friend and why?
 - What could our practice done better?

Buy 3 iPADS for patient Satisfaction Surveys; place on
Jotter Locking Tablet Holder Stand Extra Sturdy Holds iPad 2,3 and 4 (\$ 99)



Improving Exposure to the Web

Active and Interactive Division Website and ULP Website for Patient Information

- Medical Disorders information with “practice personalized logo”
- Highlight who we are and our areas of expertise.
- Highlight which procedures are done by the practice and where we work.
- Easy link to make NEW appointments (use PORTAL for F/U appointments).
- Area in Webpage to receive feedback.
- Optimize website structure for easy find by “search engine” (Google, Ask, Yahoo, Explorer, Safari, ...) giving high priority detection
- Explore how to be “pulled first” by Google (UofL consultant is “Power Creative”, contact Lottie Stockwell, Account Supervisor, lstockwell@powercreative.com, 502.297.6621, or UofL Office of Communications and Marketing 852-2647) both at ULP and UofL.

Improving MEDICAL Quality Measures

Medical Quality Measures

- Vaccination project already created by Dr. Neil Crittenden
 - Can be expanded to ALL Department of Medicine changing title of letters to “Patient with Chronic condition”, “Patient on Immunosuppressive therapy”.
 - Already is active in ALLSCRIPTS
- GiQuic
 - Indispensable for us to compete in the real world.

Improving “Value” for Payers

Cost Containment (15% of patients cause 50% of expenses)

(Once in or in preparation for ACO)

- Build IBD Home (#1 in expense)
- Build Cirrhosis Home (#8 in expense)
 - Identify frequent callers
 - Identify frequent admission
 - Identify frequent ER visitors
- Develop team to call and/or bring these patients frequently, to improve compliance (MD, RN, Dietitian, Psychologist/Psychiatrist).
- Use telemedicine, vaccines, bone health, intense nutrition, smoking cessation, alcohol abstinence, etc)