

ADVANCE Practice Webinar for PDSAs in Action
Webinar ID: 107-809-595

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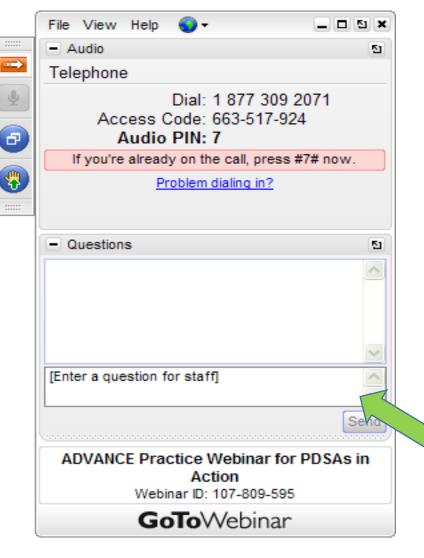
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#### Webinar Instructions



 All participants have been muted to eliminate any possible noise interference/distraction.

 If you have a question or would like to share your comments during the webinar, <u>please type</u> <u>your question in the "question"</u> box



#### No Conflict of Interest

• All presenters have signed a conflict of interest form and have declared that there is no conflict of interest and nothing to disclose for this presentation.

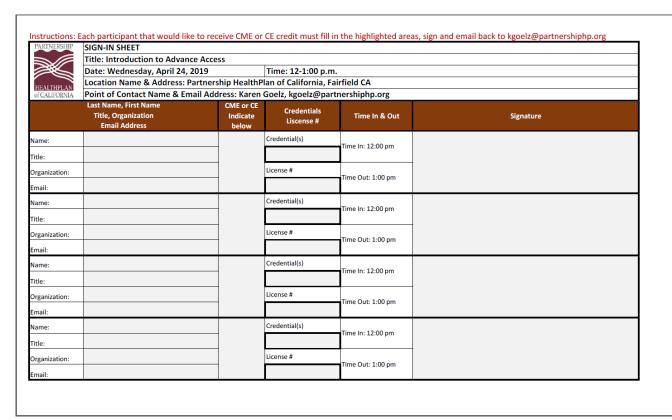
\*This Live activity, Advanced Access Webinar Series: Reducing Delays for Appointments III June 4, 2019, has been reviewed and is acceptable for up to 1.00 Prescribed credit(s) by the American Academy of Family Physicians. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

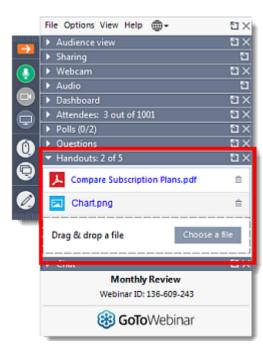


### Sign-In Sheet

To receive CME/CE credit for this webinar please download the attached sign-in sheet fill it out and email it back to

kgoelz@partnershiphp.org







#### Our Fearless Leader

Barbara Boushon, RN, BSN

An expert in the field who has over 20 years' experience serving as faculty for Advanced Access collaboratives, training sessions and webinars.





#### Introductions

- Faculty
- Participants
- The webinar series
  - Format
  - Topics
  - Preparation

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#1 April 24, 2019 (12-1 pm)
Introduction to Advanced Access
#2 May 7, 2019 (12-1 pm)
Access Strategies: "Reducing Delays for
Appointments"
#3 May 21, 2019 (12-1 pm)
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#5 June 18, 2019 (12-1 pm)
Office Efficiency:
```

"Reducing Delays at Appointments"



### Objectives for Today

- Explain how to determine readiness to work down the backlog
- Be able to create a backlog reduction plan
- State why contingency plans are important

### Changes: Access Principles

- 1. Understand and balance supply and demand
  - a) Individual
  - b) Practice
  - c) Organization
  - d) System
- 2. Reduce demand
- 3. Reduce appointment types and times
- 4. Optimize the care team to increase supply
- 5. Resynchronize the system (Reduce the backlog)
- 6. Develop contingency plans

#### Access Improvement: BIG PICTURE

Ν

Is demand greater than supply?

\/

Yes/No

Work down the backlog

Yes/Yes

Reduce demand; increase supply

No/No

Increase panel; improve prevention and chronic illness care

No/Yes

Re-measure; reevaluate processes

Y

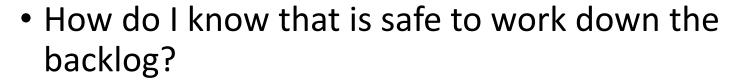
Is there a delay?

N



### Backlog Reduction: Critical Questions

- What is backlog?
- How does it get there?
- How do I know if I have it?



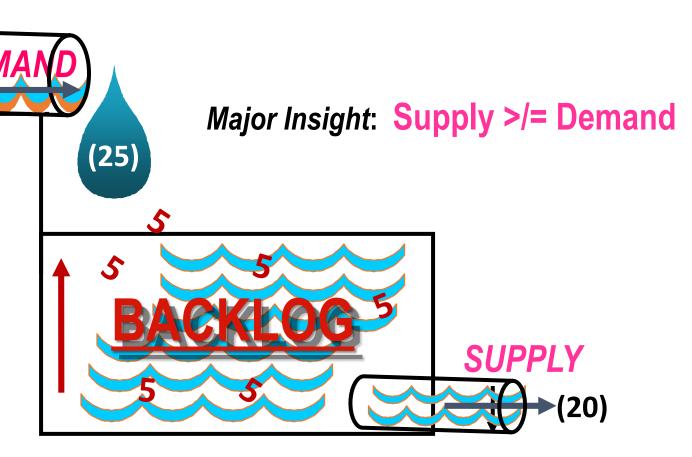




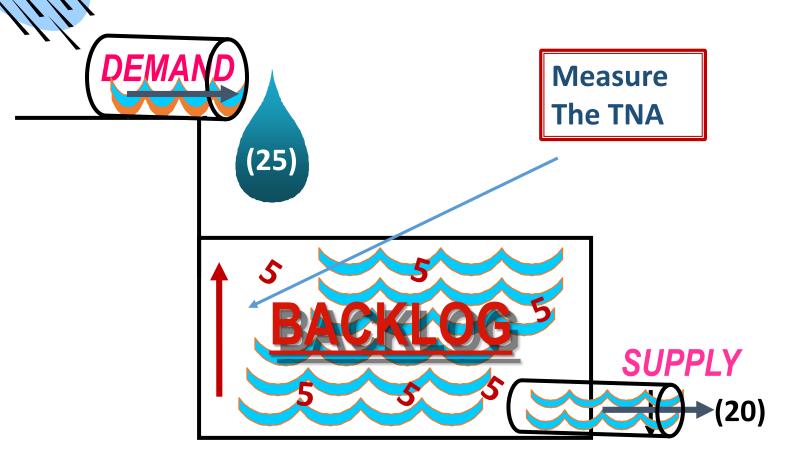


## What Is Backlog?

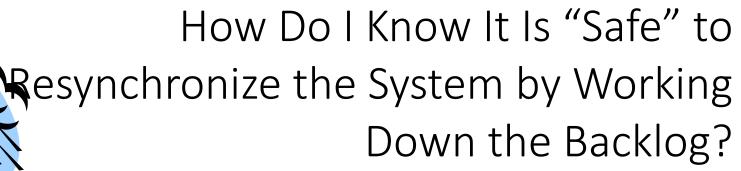
How Does It Get There?

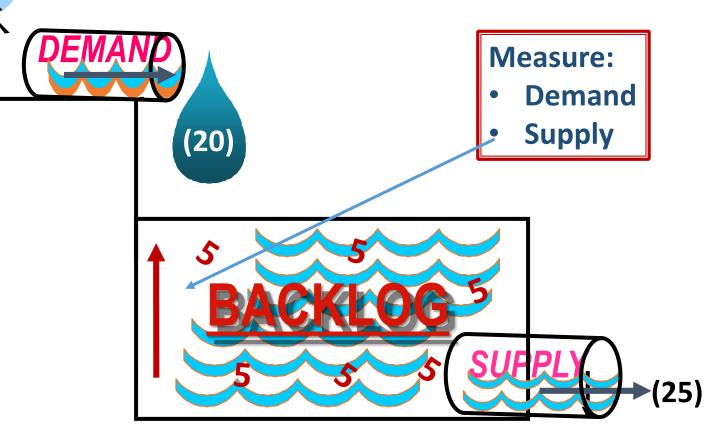


## How Do I Know If I Have Backlog?



Major Insight: Supply >/= Demand





### Is It Safe To Work Down the Backlog?

Ν

Is demand greater than supply? Yes/No

Work down the backlog

No/No

Increase panel; improve prevention and chronic illness care

Yes/Yes

Reduce demand; increase supply

No/Yes

Re-measure; reevaluate processes

•

Is there a delay?

N

#### 3NA increasing 3NA decreasing 3NA decreasing 1. 2. D>S>A 2. SU>D>S 2. S>SU>D High no-show rate 3. Moderate no-3. High no- show rate 3. High revisit rate Continuity rate low 4. 4. show rate 5. Revisit rate high High revisit rate 4. Are they ready to reduce backlog? About what would you be concerned? What do you recommend?

CASE STUDIES TEAM EXERCISE

**Provider Blue** 

**Provider Yellow** 

**Provider Green** 

#### **Provider Yellow**

- 1. 3NA increasing
- 2. D>S>A
- 3. High no- show rate
- 4. Continuity rate low
- 5. Revisit rate high

- •Panel too large?
- •Churning visits?
- Data makes sense viewed together
- Reduce revisit rate
- Increase continuity
- Delegate to other members of team
- Work down backlog when D/S ratio favorable

Are they ready to reduce backlog?
About what would you be concerned?
What do you recommend?
CASE STUDIES TABLE EXERCISE

#### <u>Provider Blue</u>

- 3<sup>rd</sup> Next Available decreasing
- 2. A>D>S
- 3. High no-show rate
- 4. High revisit rate

- •Trying to work down backlog already? Wait until D/S ratio is favorable
- •Supply understated?
- •Unsustainable situation?
- Check data
- Reduce no-show rate
- Increase return intervals
- •Measure red zone time—might be able to add supply
- Check continuity
- •Use demand reduction strategies

Are they ready to reduce backlog?
About what would you be concerned?
What do you recommend?
CASE STUDIES TABLE EXERCISE

### Provider Green

- 1. 3<sup>rd</sup> Next Available decreasing
- 2. S>SU>D
- 3. Moderate no-show rate
- 4. High revisit rate

- •Panel undersized?
- Add new patients here first
- Reduce revisit rate
- Opportunity to bring patients in for clinical care
- •When backlog out of the way, schedules may not fill
- May not need to work down backlog; it should melt away

Are they ready to reduce backlog?
About what would you be concerned?
What do you recommend?
CASE STUDIES TABLE EXERCISE

#### Develop a Backlog Reduction Plan

Collect baseline data

Set two dates



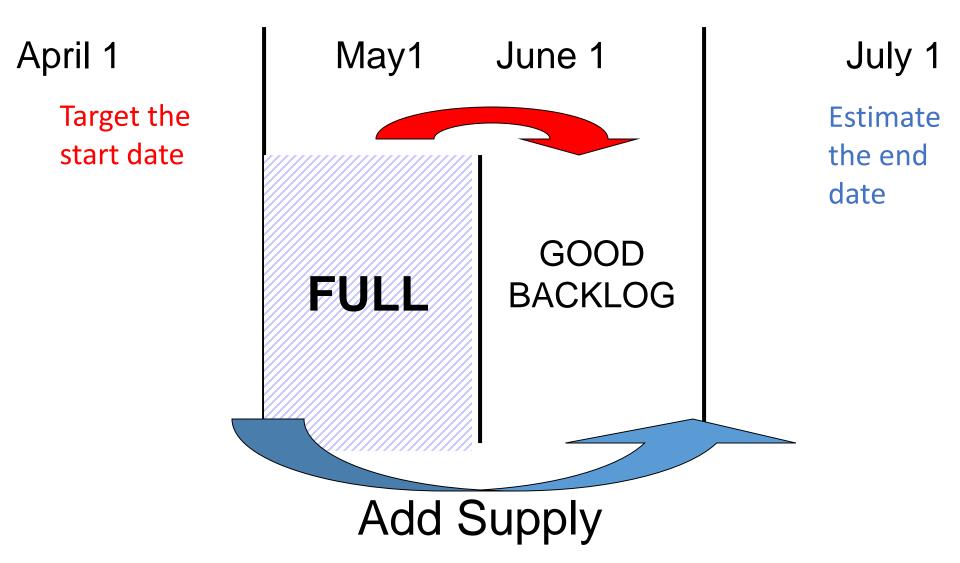
- Add (temporary) daily/weekly supply
- Do increasingly more of today's work today
- Commit to continuity and teamwork

### Collect Baseline Data Dashboard

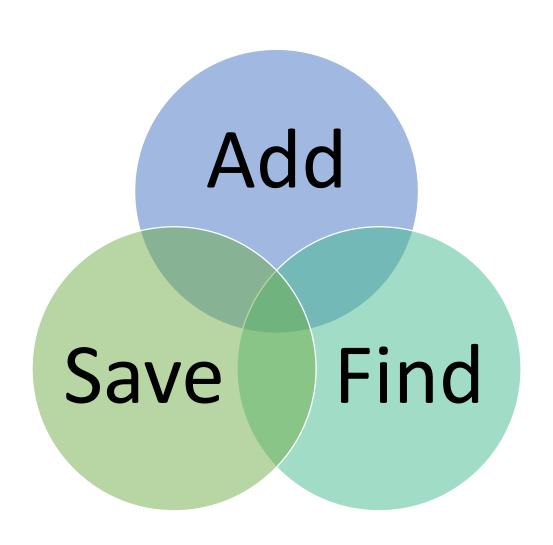
- Demand
- Supply
- Supply Used (Activity)
- Third next available appointment (3NA)
- Panel equation



### Backlog Reduction: Set 2 Dates



## Add *Temporary* Supply



### Do Increasingly More of Today's Work Today

Commit to it!

 Don't add to the end of the queue

 Loosen the criteria for "today" or "this week"



### Backlog Reduction Challenges and Tips

What are some common backlog reduction challenges and associated tips?



- Commit to continuity and teamwork
- Beware of negative reward syndrome
- Promote communication
- Collect data, and analyze it
- Gain commitment
- Support the team
- Align incentives
- Motivate the staff
- Celebrate



# Advanced Access Webinar - # 4 **Backlog Reduction**CMC – Vacaville

- This was very gradual. We used the learned AAC smart strategies with our provider champion to reduce backlog, then gradually got provider buy-in once other providers noticed success
  - Eventually this spread throughout family practice and pediatrics



### What is Contingency Planning?

- Understand and manage the daily and seasonal variation in supply and demand
- Plan for unusual but predictable events

"The predictably unpredictable"

- You know it is going to happen, just not exactly when
- You know it is going to happen, and actually plan for it
- Get proactive vs reactive

Not planning ahead can cause delays for and at appointments

## Why Does Patient Demand Vary?

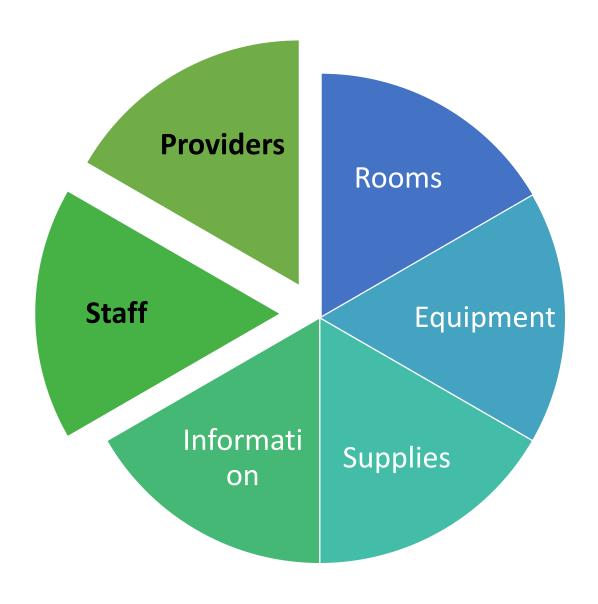
- Season of the year
- Weather
- Transportation issues
- Nature of patient's concerns
- Presence/absence of primary provider
- Missed opportunities
- Patient cancelations/clinic cancellations
- Long delay for appointment



#### Manage Variations in Demand Proactively

- Anticipate and plan for seasonal demand peaks and valleys
- Shape return demand by offering appointments late in week/early in day
- Create plans to define and manage the end of the day demand
- Plan for unusual but expected events (late patient, late provider, two patients in one slot); create scripts to provide a consistent response

### **Supply Components**



### Why Does Provider and Staff Supply Vary?

#### **Planned**

- Vacations
- Lack of Time Off Policy
- Clinic cancelations
- Resignations/retirement
- Leaves of absence
- Need for hours in another venue
- Unbalanced schedules
- Provider clinical FTE

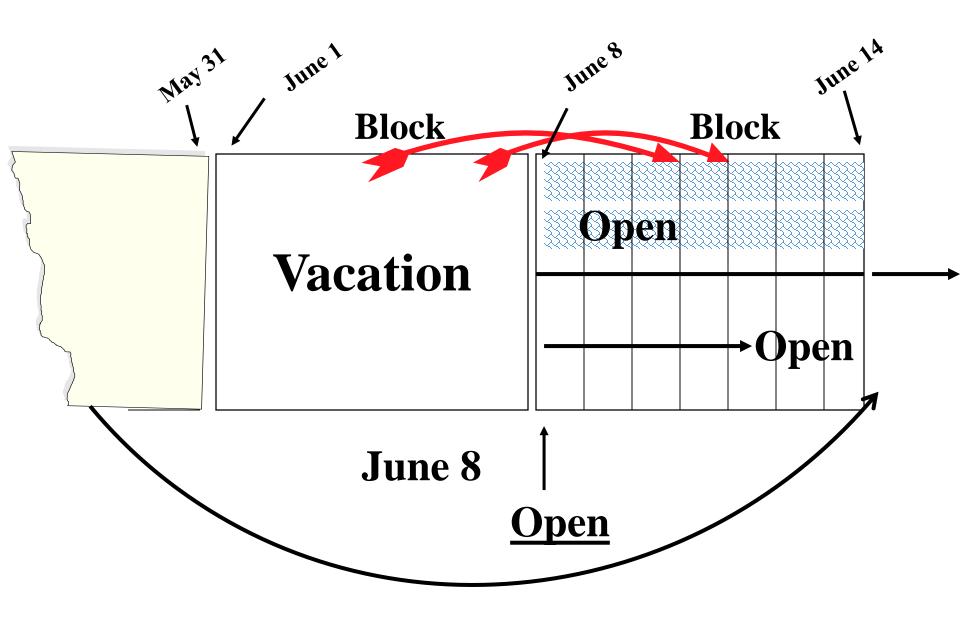
#### **Unplanned**

- Same-day call-ins
- Clinic cancelations
- Leaves of absence
- Late starts
- Weather
- Need for hours in another venue

#### Manage Variations in Supply Proactively

- Create a time-off policies based on demand data
- Assure that schedules for bookable hours match contracted expectations
- Use post-vacation scheduling strategy to address appointment and non-appointment work for absent provider
- Proactively address long-term supply shortages such as resignations, retirements and leaves of absence

#### Post Vacation Schedule



### Contingency Plans: Coverage

Coverage	Planned		Unplanned	
	Appointment	Non-Appt	Appointment	Non-Appt
Provider	<b>1</b> a	<b>1</b> b	<b>2</b> a	2b
Staff	<b>3</b> a	3b	4a	4b



# Advanced Access Webinar - # 4 Contingency Plans CMC – Dixon

 Routine visits are not scheduled immediately following a providers scheduled absence

 Routine visits are scheduled before and/or after holiday seasons to allow for more acute patient needs

### Changes: Access Principles

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#### Between Now and Next Session.....

- Continue to test change ideas:
  - Reduce demand
  - Increase supply
  - Reduce appointment types/times
  - Reduce no-shows
- Determine if ready for backlog reduction



#### Reminder

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## Questions?

