

# CG-CAHPS Access to Care Susquehanna Health Medical Group, Williamsport, PA

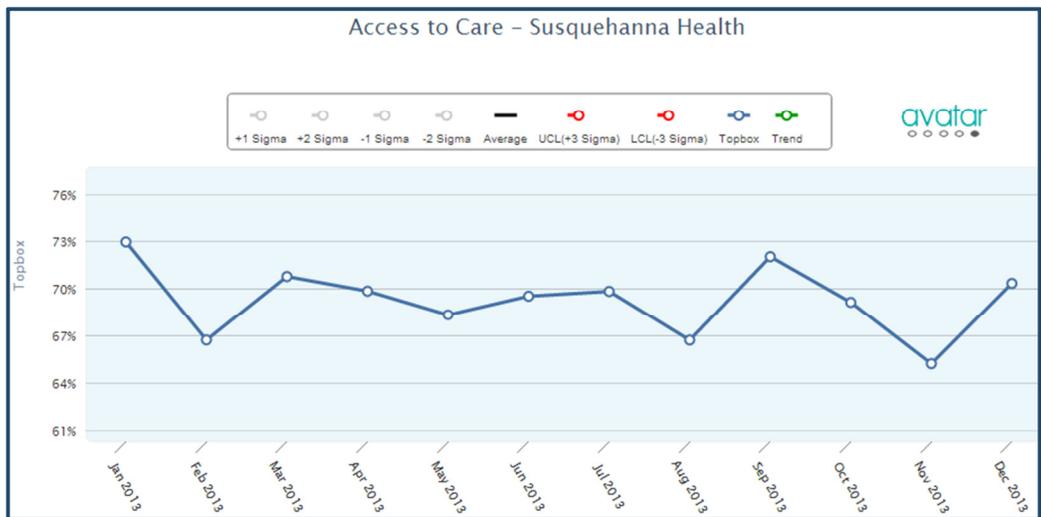


*“We currently don’t block any appointment slots; we make sure we get the patient in...that is the standard protocol at Susquehanna Health.” —Vickie Warren, Director of Operations*

Located in north central Pennsylvania, Susquehanna Health Medical Group serves an 11-county area with primary care and a broad range of specialty care. Susquehanna Health Medical Group employs more than 100 physicians and more than 20 advanced-practice professionals.

It starts at the top. Susquehanna Health Board of Directors and senior leadership have established improving the patient experience as an essential element for the organization. Leadership has set a goal of obtaining the 90<sup>th</sup> percentile in patient experience

and has provided direction and resources for the organization to achieve this. For Susquehanna Health, improving Access to Care is a key component of their Strategic Operating Plan. Although relatively early in their journey and a newer partner of Avatar Solutions, improvement efforts are well on their way and Susquehanna Health has already demonstrated some excellent results. Their performance has continuously measured within the Avatar Solutions top quartile for the Access to Care composite, with an aggregate over the last year performing at the 81<sup>st</sup> percentile.



Source: www.ImprovingCare.com

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### Measuring Improvement & Setting Goals

Improvement requires measurement. The goal of achieving better access for Susquehanna patients has resulted in providing key measures to providers to help meet the needs of the community. Although Susquehanna Health has begun implementing an electronic medical record (EMR), not all practices and specialties are fully functional on the same platform across the medical group. Currently, they have a mixed EMR with 2 different vendors across the medical group, creating difficulties to report certain data in a consistent manner.

Although there are challenges to measurement, Susquehanna Health Medical Group determined that the Third Next Available Appointment (TNAA) would be a key indicator for measuring their success in improving Access to Care. This means collating the information manually and investing the resources to ensure accurate and useful information. By utilizing TNAA, Susquehanna has access to benchmarks for both new and established providers, which allows individual providers to understand how their data compares to like practices and specialties. Furthermore, Susquehanna Health Medical Group determined that TNAA data would be shared at the provider level across all specialties in order to give meaningful and actionable information to those providers needing to improve or simply understand their access.

With improvement and measurement comes goal setting. Achieving patient experience goals at Susquehanna Health is important to the strategy of the organization. With a lofty goal to achieve the top decile in performance, key incentives are now incorporated into physician contracts and employee performance reviews. Currently, embedded into all physician contracts at Susquehanna Health Medical Group are quality incentives that include patient experience goals. Moving forward in 2014, all employees will have a monetary incentive based on patient experience performance, which will be reviewed and discussed at annual employee reviews.

### Implementation of Access to Care Program

Implementing an Access to Care program has been an important contributor to success at Susquehanna Health Medical Group. There were three key practice changes implemented within this program. First, ***commitment to removing variability*** by *standardizing appointment types and slots* for Susquehanna was one of the big factors in high performance. They reduced the numerous appointment types down to three – urgent, routine, and ASAP. This change was important because it allowed schedulers to standardize the types across all specialties and allowed for less variability and questions regarding which appointment types to schedule for the patient. In addition, the times of the slots were also standardized

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based on the specialty and physician. The standard appointment durations were set at either 15 and 30 minute time slots or 20 and 40 minutes. Again, these changes had a direct impact on schedulers by streamlining options and removing the back and forth between providers. In addition, the medical group decided not to have any time slots blocked during the day.

The second component of the Access to Care program focused on **returning patient messages the same day**. Susquehanna looked at this from the patient perspective and recognized that having all calls returned the same day is important. To meet this goal, collaboration between the providers and nurses has been a key to success. All inbox messages are cleared by the end of each day. Sometimes this means calling a patient without an answer or result, but the call is still made, even if just to help keep the patient informed.

The third component of the Access to Care program was **implementing a Team Care model** within the medical group. The goal of implementing the Team Care model was to allow for more patients to be seen sooner as well as to be able to have a larger patient panel through multiple caregivers having interactions and/or visits with the patient. The model also allows for clinicians to work at the top of their license when caring for patients. Physicians are able to care for the high risk and most acute patients through clinic visits. Physician Extenders or Advanced Practitioners are utilized to offset physician appointment requests

for more common and less severe clinic visits such as strep throat, sinus infections, etc. Advanced Practitioners are also utilized to help manage patient panels around medications, routine follow-ups, etc. Finally, nurses and other clinical staff are able to help with administering flu shots, verifying key patient information, documentation, etc., for specific patient needs. Other care team members that may be involved include pharmacists and social workers. There are varying models of Team Care, and the model Susquehanna adapted was having each physician team up with a clinical support team. This means that most physicians are assigned an LPN and an Advanced Practitioner to meet the needs of patient access.

### Building a “World-Class Training” Program

Beyond implementing an Access to Care program, Susquehanna built a homegrown service training program that pulled from other well-known service principles within the healthcare industry. Dubbing it “World-Class Training”, Susquehanna established training covering key interactions with patients and family members, including what was expected of employees concerning service, as well as how to handle interactions regarding pre-visit, clinic visits, and follow-ups. All staff and administrators throughout Susquehanna Health Medical Group were required to attend the three-hour session. One of the topics covered during the session was phone etiquette. This training was particularly helpful for schedulers and an added improvement beyond the

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standardized appointment types and times.

Susquehanna Health Medical Group uses comments from the CG-CAHPS survey to help capture the patient voice. A process is in place to help share positive comments with staff and providers as a way to say “Keep it up!” On the flip side, negative comments and complaints are also shared with staff and providers so that improvement efforts can be made. Typically, the comments are shared through staff and provider meetings.

### **Continuous Improvement**

A Continuous Improvement philosophy has been adopted by Susquehanna. Time spent in the waiting room is not only a key part of the patient's experience, but it is also a part of the Access to Care composite within CG-CAHPS. Their successes notwithstanding, Susquehanna remains committed to improving performance in this area. They have an automated

appointment reminder call system that calls patients the day before their appointment. When appointments are made, the scheduler sets the patient's expectation that they will be seen on time; however, they are asked to come 15 minutes early. When they check in, the staff thanks them for coming early.

Improving wait times for patients is often related to inefficiencies with flow as well as scheduling. To improve in these areas, all leaders at Susquehanna Health Medical Group are required to go through LEAN training. In addition, Susquehanna also provides resources for improvement through their Management Engineer Team. The team is skilled in quality improvement and assists departments to achieve goals resulting in better care. Finally, Susquehanna created a Recruitment Team that continuously monitors community demographics and analyzes the market. The goal of the team is to balance the size and services of the practice to meet the needs of the community.