

### FEATURED SPEAKER

# Jason Ruda

**Experience Director** 



# From the Front Lines:

How to Establish a Practical Patient Experience Program



**2022 NRC HEALTH SYMPOSIUM** 

## Objectives



Offer a framework for establishing or expanding a Patient and Provider Experience program in ambulatory settings.



Identify successful strategies and tactics to engage stakeholders and drive performance.

3

Share lessons learned and future planning.

Wyomissing

### Who is Tandigm Health?

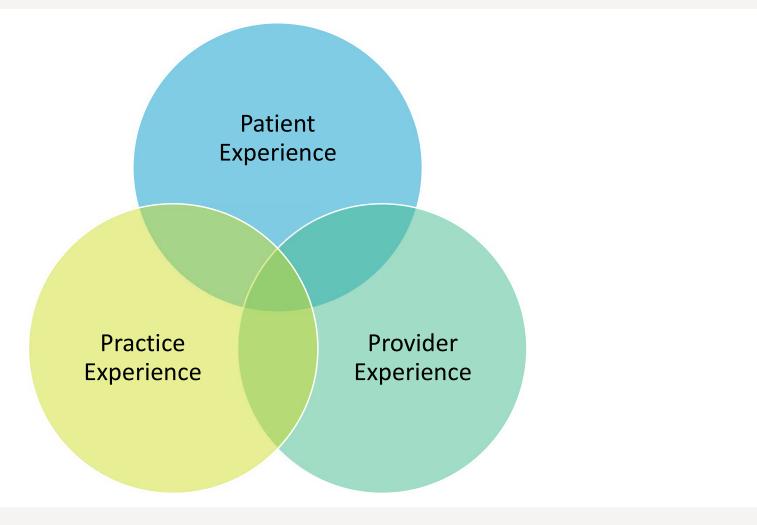
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Medford,

- Provider-led; clinically focused
- Over 170 independent primary care practices serving approx. 100,000 patients.
- Mission: to improve healthcare in the Philadelphia area while making it more affordable for everyone.

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## Our Journey to Excellence 2023 + 2022 2021 2020 Build Refine Grow Engage Π **2022 NRC HEALTH SYMPOSIUM**

## Catalyst for Change

- Increased CMS emphasis on patient experience
- Weighted measures growing from 1.5x (2017) to 4x (2023)
- It's the right thing to do

## What We're Measured On

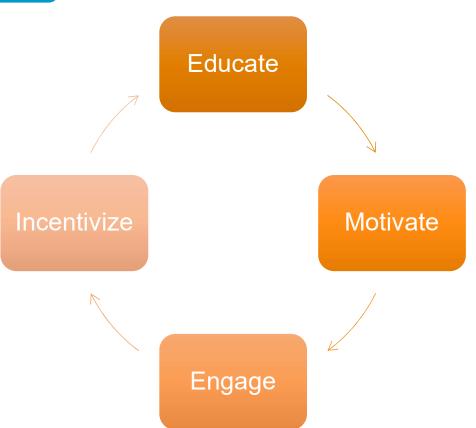
### **CAHPS: Consumer Assessment of Healthcare Providers and Systems**



### We Learned from the Best







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## 2021 | Build

## 2021 Patient Experience Manual

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#### **Patient Experience Program Manual**

Addendum to Provider Manual Specific to Keystone Health Plan East Members

2021

April 2021

| Measure 1   | Foundations and Education           | Basic | Intermediate | Advanced |
|-------------|-------------------------------------|-------|--------------|----------|
| Activity 1A | Patient Experience Education        | 20    |              | 35       |
| Activity 1B | Patient Experience Champions        | 5     | 10           | 20       |
| Activity 1C | Words that Matter                   | 10    | 25           | 45       |
|             |                                     |       |              |          |
| Measure 2   | Access and Care Coordination        | Basic | Intermediate | Advanced |
| Activity 2A | Prepared Care Team                  | 5     | 15           | 25       |
| Activity 2B | Same Day Appointments               | 5     |              | 15       |
| Activity 2C | Call Us First – Focus on Experience | 5     | 15           | 25       |
| Activity 2D | Medication Excellence               | 10    | 25           | 35       |
|             |                                     |       |              |          |
| Measure 3   | Health Outcomes                     | Basic | Intermediate | Advanced |
| Activity 3A | Patient Centered Health Questions   | 20    |              | 35       |
| Activity 3B | Urinary Incontinence Education      | 10    |              | 20       |
| Activity 3C | Falls Reduction                     | 20    |              | 45       |

## 2021 | Build

| C: Call Us First – Patient Experience Focus  | Support / Details and Video   |  |  |  |
|--|---|--|--|--|
| Goal: Promote Access to Care, Care Coordination, Getting Needed Care CAHPS questions   |   |  |  |  |
| Basic: Practice, by July 1 <sup>st</sup> , 2021 completes self-<br>assessment (one per practice) and by end of year<br>improves/strengthens 2 areas         See review of components of Call Us First         Intermediate: Practice completes self-assessment<br>and improves / strengthens 4 areas | <ul> <li>Assessment must be completed by<br/>July 1, 2021.</li> <li><u>All Staff ideally review CUF Video</u></li> <li>Staff can track their <u>viewing here</u></li> <li>Areas for improvement should be<br/>declared to PHSO (Tandigm Rep) for<br/>placement on action plans</li> </ul> |  |  |  |
| Advanced: Practice completes self-assessments, has<br>demonstrated improvement in 4 areas <u>and</u> has<br>developed 2 "same day/soon" arrangements with<br>local specialists for defined conditions  |   |  |  |  |
| Scoring: End of year attestation.<br>1. Completed self-assessment.<br>2. Submitted description of improvements implemented.  |   |  |  |  |

3. Names of specialists and conditions are submitted

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### Foundation

## Patient Experience Training Video

- Key concepts fundamental to the patient experience.
- Stories told through providers and staff across network.
- Required viewing for team members; part of the PCP Incentive Plan.
  - Let's hear from a Tandigm physician...



### Foundation

### Patient Experience Champions League



Champions across the network.



Average attendance at monthly webinars.



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### Access to Care & **Care Coordination**

### Call Us First<sup>®</sup> Program





### **Patient Awareness**

We want you to receive the right care. at the right time, and in the right place.

Are you experiencing symptoms or difficulties that require medical attention? Do you feel the need to see a specialist? You should know that when you have unexpected or urgent medical needs, as your primary care physician we want you to **Call UP First**. You should also **Call** UP first the UD First field will be first being scheduling an appointment with a specialist. We can often meet your care needs at our office and save you a higher copay.

> Considering a Specialist? We can help you determine where you should go for care. If you need specialist, we can point you in the rij direction.

🕋 Call Us First. We're here to help. call C us first

### Access to Care & Care Coordination

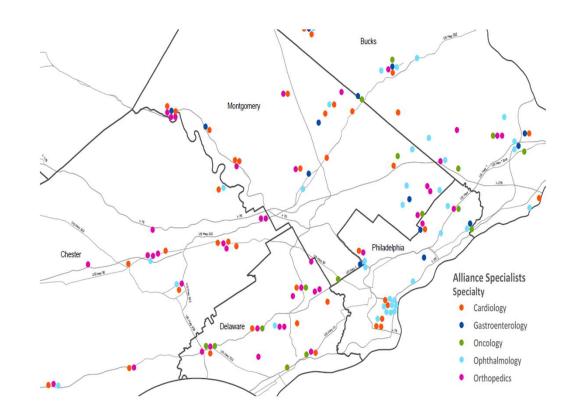
### Same Day Soon / Specialty Alliance

### Our Specialty Alliance: 37 practices; 165 locations across the 5-county region

- Orthopedics
- Cardiology
- Gastroenterology
- Ophthalmology
- Oncology

### We look for specialists who will:

- Create and utilize clinical best practices
- Self-manage to quality and utilization targets
- Support most cost-effective sites of service



### **Health Outcomes**

#### **Frequently Asked Questions:** URINARY INCONTINENCE (LOSS OF BLADDER CONTROL)

#### What is urinary incontinence?

Urinary incontinence is the loss of bladder control. It is not a disease. It is a symptom. It can range from sometimes leaking urine with a cough or a sneeze to having an urge to go to the bathroom that is so sudden and strong that you don't get to the toilet in time.

#### When should I tell my doctor about my loss of bladder control?

Many people think that loss of bladder control is a normal part of aging or something you just need to live with. But you do not need to handle this alone.

It may be time to talk to your doctor if your quality of life is impacted such as:

- · You must do frequent clothing/bedding changes due to wetness
- · You notice any redness or skin changes due to wetness
- You shy away from doing things for fear of having an "accident"
- · You rely on pads/briefs to manage wetness

#### What are risk factors for loss of bladder control?

In general, the risk factors for loss of bladder control include gender, age, obesity, smoking, and family history. It happens twice as often in women as men.

- Many things can cause loss of bladder control such as:
- Hormonal changes (such as menopause)
- · Childbirth (which can weaken the muscles used to control the bladder)
- History of pelvic or abdominal surgery
- · Prostate surgery or other prostate conditions in men

#### Can loss of bladder control be treated?

In a word, ...YES! There are many treatments that can help. For most people, simple lifestyle changes or medical treatment can decrease or stop the symptoms.

Here are some of the options to discuss with your doctor:

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Weight control







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Special exercises, either with a physical therapist or on your own (such as Kegel exercises)

Diet changes (limit alcohol/caffeine, chili peppers and artificial sweeteners)



# **UI & Falls Reduction**

#### What You Can Do to Prevent Falls

#### Exercise or Falls Prevention Program Physical Therapy

- Occupation Therapy for Home Safety Assessment
- Optometry/Ophthalmology Referral

 Podiatry referral Medication Review

Vitamin D Supplementation

Tandigm Complex Care

Next Appt

Contact Information:

Management Referral Additional recommendations:

#### Safer Steps

A Matter of Balance

In this one-hour course, participants learn how to stay independent by preventing falls. This class points out common safety hazards in the home and teaches the importance of exercise

Falls Prevention

Healthy Steps for Older Adults

them. Participants learn how to exercise

safely at home with a focus on health and

well-being. It also includes a physical skill

screening to determine a person's fall risk.

This more intensive program consists of

eight sessions. Each session is a half day.

Trained coaches help teach participants

about the importance of balance through

exercise and also address fears about falling.

This two-part workshop raises awareness

about the causes of falls and how to prevent

Programs

(HSOA)

#### Yoga

There has been a fair amount of research on how to prevent falls in elderly. Yoga has been shown to help maintain strength, stability and agility.

#### Tai Chi

Tai Chi involves a series of movements performed in a slow focused manner. It has been found to help reduce falls in older adults with a high risk of falling.

#### Talk to your **Primary Care** Physician about how you can help prevent falls.

if you fall, worry about falling, or feel unsteady.

Learn more about falls prevention by visiting cdc.gov/steadi

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### Take Action to Prevent Falling



Focus on patients' experience of care as well as their clinical outcomes

## Trust, but Verify: Year-End Attestation

|   | _ |
|---|---|
|   | _ |
|   |   |
| - | - |
|   | - |
|   | - |
|   | _ |

Practices required to do year-end attestation to document level of activity completion.



100% of practices completed the attestation.



Data validation and review conducted to assess accuracy of submissions.

## Maintaining Network Engagement

- Champions League
- Practice Support Sessions
- Network Quality Forum
- Video Recordings





## Network Training Sessions

32

Practices requested training

57 Sessions between June to December

Minute commitment per practice, per session

Recommended entire practice in attendance



## 3 Key Observations

- 1. Communication gaps are the biggest hurdle to overall performance
- 2. Practice Experience = Patient Experience
- 3. Ongoing professional development and training often needed



## **Challenges and Barriers**

- Pandemic and practice fatigue
- Bandwidth at practices and our own team
- Staffing
- Scope creep



Leverage the Patient Experience Champions



Full practice participation to connect the dots

# Key Takeaways



Patient Experience sensitivities

Providers are eager for communications skills training



Return to meaning is an antidote

| 2022   Refine  | 2022 Patient Experience Manual |   |  |  |
|--|--------------------------------|---|--|--|
| Survey Measures  |                                | Process Measure   |  |  |
| <ul> <li>Medicare Advantage patients</li> <li>Triggered by PCP visit claim</li> <li>Interactive Voice Response &amp; Text</li> <li>13 questions total</li> <li>4 questions are incentivized</li> </ul> |                                | <ul> <li>Selection and completion of 2 self-selected goals.</li> <li>Practices given 4 months to complete goal requirements.</li> </ul> |  |  |

## Acknowledgements & Key Contributors

Special thanks to The Tandigm Network Solutions Team that provided operational, boots-on-the-ground support at the practice-level.

| Anita Brazill             | Patient Experience Advisor                  |  |
|---------------------------|---|--|
| Anne Morisseau            | Senior Director, Quality                    |  |
| Doron Schneider, MD, MBA  | VP, Population Health and Clinical Strategy |  |
| Lee Buttz, MD, MBA        | Chief Medical Officer                       |  |
| Michelle Sibel, DNP, CRNP | Manager, Medical Cost Council               |  |
| Pam Eckardt, RN, MBA      | Chief Network Officer                       |  |

# **Questions?**

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# Questions?

### In-person

- 1. Wait for the microphone
- 2. Please stand
- 3. Provide us your name & location of your organization
- 4. Ask your question

### Add your questions to the question box.

Virtual

Ask a Question