

Welcome

Train the Trainer Conference

9/27/2017



Purpose

Purpose

The purpose of the OST Train the Trainer program is to train SCAN's provider partners in core competencies necessary in working with older adults. These core competencies include customer focus, compliance, communication, team work, problem solving, quality and patient outcomes.



Why are you here, now?



Goals and Outcomes

Goals

- Provide the materials, skills and techniques necessary to engage and train staff in interacting with senior patients
- Demonstrate methodologies to stimulate critical thinking and creativity
- Model the behaviors and attitudes essential in working with seniors.

Outcomes

- OST trainers will be able to:
 - Deliver and facilitate SCAN OST courses to their staff
 - Incorporate training into performance metrics
 - Develop and improve team engagement
 - Demonstrate the communication skills needed to deliver training effectively
 - Identify and implement a variety of education techniques and methodologies.



Meet our Trainers

Robi Hellman, BSN, MSN, CNS

Renee McNally

- Director of Health Care Services Education and Training
- Joined SCAN in 2012
- 30 years of diverse clinical and management experience in acute-care, ambulatory, academic and non-profit settings



- Health Care Services
 Trainer
- Joined SCAN in 2005
- Develops and delivers instructor-led trainings, workshop sessions and computer-based trainings for SCAN staff and provider partners

Nancy Schwartz, RN, MBA



- Medicare Star Quality
 Trainer
- Joined SCAN in 2016
- 25 years of experience in the medical field
- Teaches courses relating to Clinical Trials and Regulatory Issues at UCI and USC



Meet our Team - Network

Alex Legaspi



- Senior Network Management Specialist
- Joined SCAN in 2011
- 5 Star expert of Network Management and liaison to SCAN's Provider Partners on 5 Star and Quality Initiatives

Rachel Hizon



- Strategic Initiatives Specialist
- Joined SCAN in 2010
- Serve as a resource and expert on CMS 5 Star metrics and SCAN's quality tracking tools
- Train provider groups on the use of SCAN's quality tracking tools and databases to retrieve adherence and opportunities to close health care gaps



Meet our Team – 5 Star

Jenny Gonzales-Kongpien



- Project Manager Quality Initiatives
- Joined SCAN in 2017
- Supports the development and implementation of 5 Star projects with a focus on Member Satisfaction

Sarah Pham



- 5 Star Quality Program Coordinator
- Joined SCAN in 2017
- Supervises all scheduling and coordination involved with 5 Star's Office Staff Training Program



Agenda

Time	Торіс	Speaker	
8:00 am – 8:20 am	Breakfast/Registration		
8:20 am – 8:30 am	Opening Remarks *Pre-conference raffle*	Michelle Fujii, MHA Manager, Medicare Star Quality	
8:30 am - 8:40 am	Measure of Quality	Donna Sutton, MBA, MBB Director, Medicare Star Quality	
8:40 am – 8:50 am	Executive Keynote Speaker	Terence Offenberger, MD, MBA Vice President, CA Medical Director	
8:50 am – 9:00 am	Activity		
9:00 am – 10:00 am	Presentation: Engaging the Adult Learner	Robi Hellman, RN, MSN, CNS Director, Health Care Services Education and Training Renee McNally Health Care Services Trainer	
10:00 am – 10:20 am	Break *Raffle*	*Please silence your cell phones*	

Agenda

Time	Торіс	Speaker	
10:20 am – 11:30 am	Presentation: Welcoming New Senior Patients Training	Renee McNally	
11:30 am – 12:00 pm	Presentation: Training insights/Methods/Key Characteristics/Engagement	Robi Hellman Renee McNally	
12:00 pm – 12:45 pm	Lunch *Raffle*	Donna Sutton, MBA, MBB Director, Medicare Star Quality	
12:45 pm – 1:15 pm	Learning Activity		
1:15 pm – 2:00 pm	Presentation: C.L.E.A.R. Training	Nancy Schwartz, RN, MBA Medicare Star Quality Trainer	
2:00 pm – 2:15 pm	Break *Raffle*		
2:15 pm – 3:00 pm	Presentation: H.E.A.T. Training	Nancy Schwartz	
3:00 pm – 3:45 pm	Activity		
3:45 pm – 4:00 pm	Closing remarks/OST Reward Program *Final raffle*	Michelle Fujii	

Conference Materials

For your convenience, all conference materials are available online.

Please refer to the link below:

https://scanhealthplan.com/providers/train-the-trainer



PRE-CONFERENCE RAFFLE!





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Measure of Quality

Donna Sutton, MBA, MBB

Director, Medicare Star Program

In the Beginning

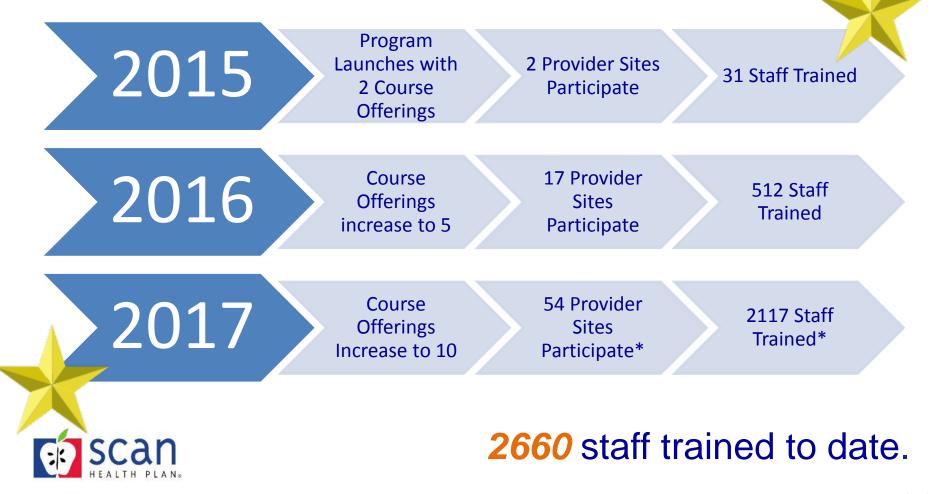
• Began as an idea 2 ¹/₂ years ago



- Work together with our networks
- Address the toughest 5 Star Measures
- Started with 2 courses
 - Grown into a full offering of training
 - ✓ Improve health outcomes
 - ✓ Increase patient satisfaction
 - ✓ Close gaps in care



Program Offerings Have Grown



*As of 9/25/17

Office Staff Training Offerings



New in 2018

- ✓ Care Coordination
- ✓ Hospitalizations
- ✓ Health Literacy
- ✓ Cultural Sensitivity

C.L.E.A.R. **Medication** Adherence **Onboarding Access Workshop Urinary Incontinence** Depression **Opioid Abuse**



Why is Office Staff Training Important?

Definition of Quality

- Depends on what you are trying to improve
- Changes how you will measure quality
- Changes the definition of quality

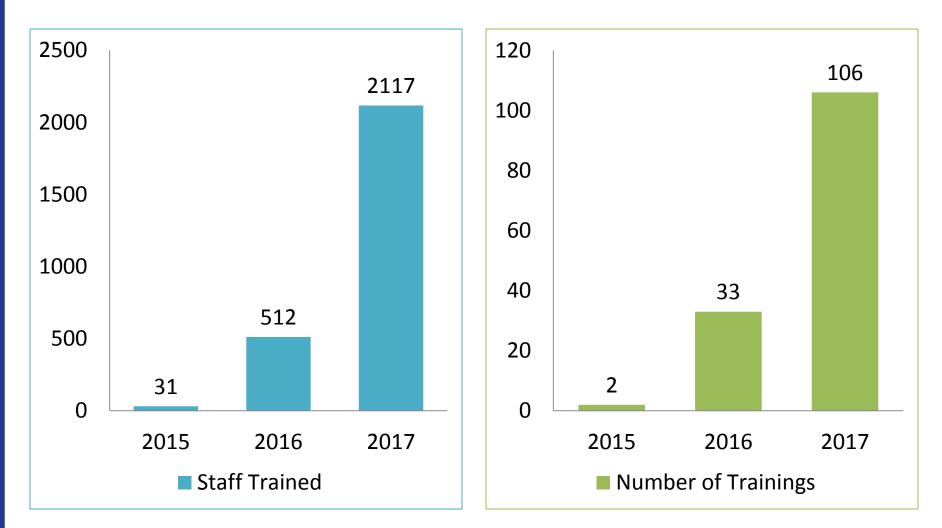
Moments of Truth

- Importance of creating a great, unforgettable experience
- Critical or significant patient touch point
- First 15 seconds interacting with the patient





Office Staff Training By the Numbers





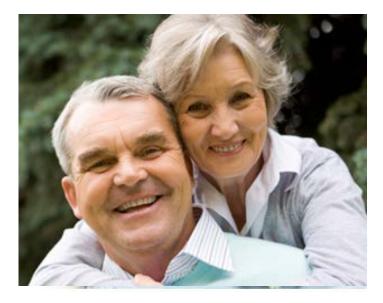
*As of 9/25/17

Goal of Train the Trainer

- Create a community of Trainers
- Increase training opportunities and exposure to OST topics
- Significantly impacting more patients, more moments of truth
- Ultimately impacting member experience and health outcomes







Creating a Culture of Quality

Terence Offenberger MD, MBA, FACP VP/CA Medical Director

9/27/2017



Culture of Quality

<u>Defining a Quality Culture</u> "The way we do things around here ..."

- Organizational culture emerges from that which is <u>shared</u> between colleagues in an organization, including <u>shared beliefs</u>, <u>attitudes</u>, <u>values and norms of behavior</u>
- Reflected by a common way of making sense of the organization that allows people to <u>see situations and events in similar and</u> <u>distinctive ways</u>
- Way things are <u>understood</u>, judged and valued



Culture Changes

Comprehens					
Understanding of the problem	Compassion Belief and	- Collaboration			
	Commitment	Teaming between subcultures (internal, external)	Coordination System processes, infrastructure and ideation	Convergence Leadership of local culture & dissemination of new norms	

Changing Culture via OST

- As Trainers you set the tone and serve as an example of your organizations commitment to quality to your provider offices
- Focusing on the patient and their health outcomes remains a priority.
- Empower staff and give them recognition for the impact they have on the patient experience.

Creating a Culture of Quality

- Every organization has multiple cultures.
- Achieving an optimal culture of quality requires assessment, improvement, and integrating into the fabric of the organization.
- Quality is everybody's job, integrate into your policies, job descriptions, orientation program, your engagement activities.

Activity Time!





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Would You Rather...?





Engaging the Adult Learner

Train the Trainer

September 27, 2017

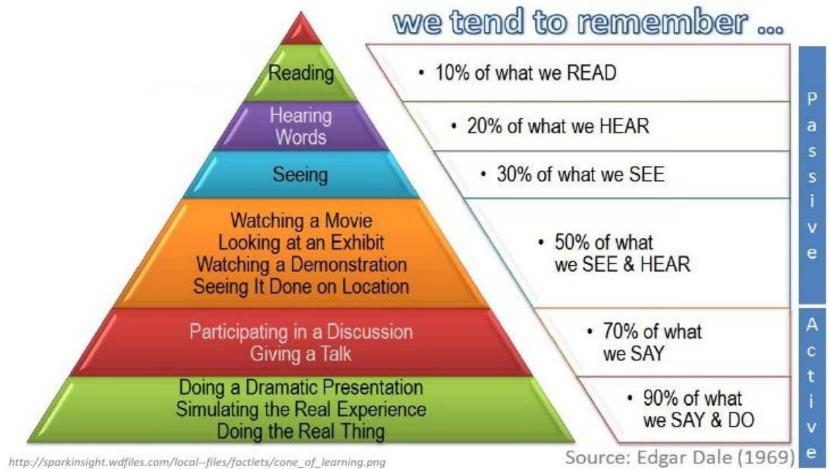


Tool Kit Exploration!

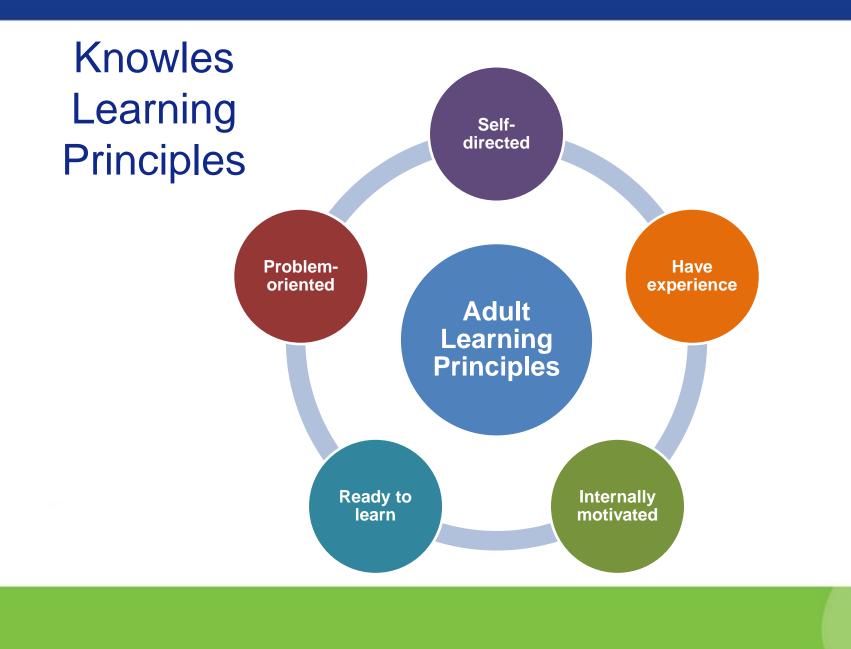




After 2 weeks,



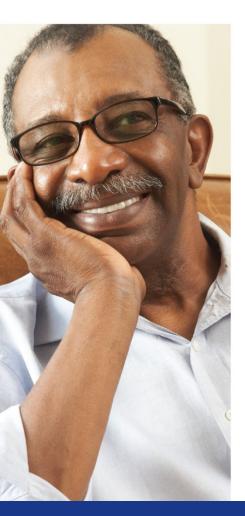
http://sparkinsight.wdfiles.com/local--files/factlets/cone_of_learning.png



Key Characteristics



Autonomy



- Control and self-direction
- Self-assessment and evaluation
- Desire a peer relationship with instructors
- Expect greater interaction with instructors
- Facilitation rather than pure instruction



Goal Oriented

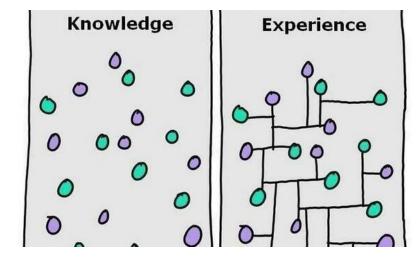
- Many adults have specific goals they are trying to achieve
- Prefer to partake in learning activities that help them reach their goals





Practical

- Practical knowledge and experiences that will make work easier or provide important skills
- Need personal relevance in learning activities
- Higher interest to develop knowledge and skills to apply to daily activities





Competence & Mastery



- Prefer to learn by doing rather than listening to lectures
- Link new learning to their prior learning
- Evaluate concepts based on how it "fits" their experience
- Experiential learning / knowledge



Respect

"Adults believe they are responsible for their lives. They need to be seen and treated as capable and self-directed." Knowles

- Providing an environment of self-directed learning will increase the level of absorption of the training
- Adult learners possess a wealth of experiences
 - Such knowledge should be honored and respected
 - Be courteous toward adult learners
 - Treat them as equals
 - Allow them to voice their opinions freely and without judgment





Slower Learners

- Slower learners (less adaptable to change)
 - Aging does affect learning
 - Tend to learn less rapidly with age
 - Depth of learning tends to increase over time, navigating knowledge and skills to unprecedented personal levels
 - Allow more time for interaction between adults to allow learners to network together to sharing of perspectives and experiences
 - Think about the seniors in your group
 - Make effort to present material in a variety of ways to accommodate different learning styles
 - Recommendations from Trading Ages





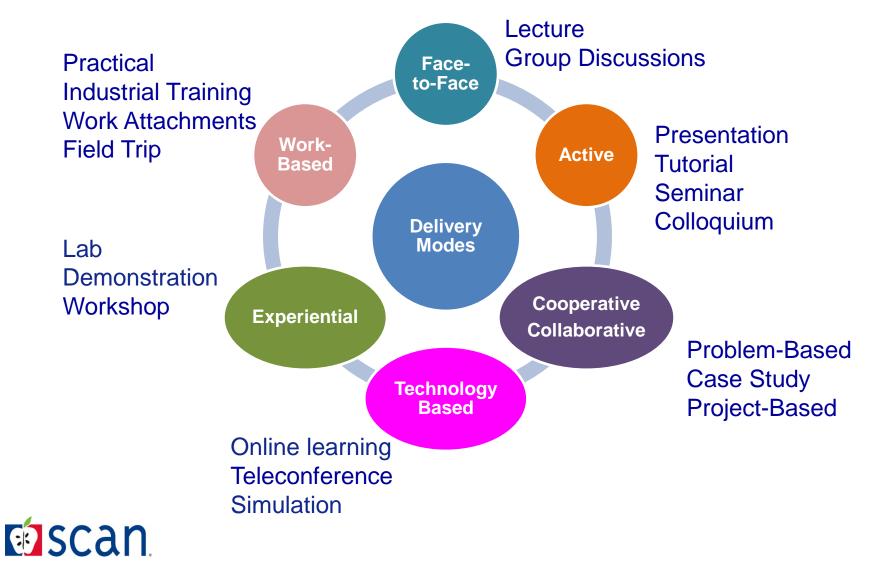


Big Picture Needs

- Require the big picture view of what they're learning
- WHY and WIIFM?
 - Need to know how the small parts fit into the larger landscape
 - Want to know the purpose of training / underlying motivation
 - Link new concepts to older, understood, and accepted concepts
 - Seek for incremental changes through our education efforts
 - Allow for the "proof" gained from such incremental change to encourage the adult learner to explore/accept more change



Delivery Strategies



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Getting Ready



- Allow for limited discussions and challenges of the ideas presented
- Discuss how the learning can be applied in real world applications
- Know your audience & expect to be nervous

GO - Training

- 1. Communicate the session objectives at the beginning of your presentation
- 2. Greet the learners individually and as a group
- 3. Tell participants what you plan to tell them
 - Subject material and learning objectives
- 4. Tell them
- 5. Tell them what you told them
 - Review learning objectives, activities









Managing the Room

Allow for limited discussions and challenges of the ideas presented

Discuss how the learning can be applied in real world applications

Be sensitive to participants literacy differences

Control disruptive participants

Answering Questions

- Repeat (clarify) the question
 - Answer now/later
 - Redirect
 - Discussion
- Don't bluff
 - You know
 - You don't know





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Let's take a break ...





RAFFLE!







New Patient Onboarding



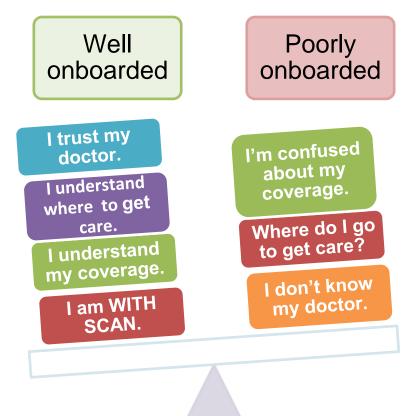
Onboarding Objectives





What Is Onboarding?

- The process of welcoming a new patient
- The opportunity to get a new patient on the early path to quality care





Question

Who is responsible for onboarding? a) The medical group b) The PCP c) Health plan d) All of the above





Why Is Connecting with the PCP Important?

- Patients who see their PCP have better care.
- Patients who don't see their PCP are not always healthy.
- Connecting with care helps 5-Star:
 - Preventive screenings
 - Preventable hospitalizations
 - Readmissions
 - Medication adherence





Source: SCAN Cohort Analysis 2014

Front Office

Characteristics

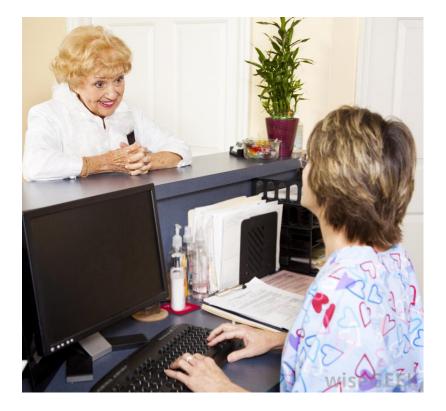
- High performing
- Organized
- Efficient processes
- Manage office flow
- Know impact of CAHPS' questions
- Timely communication
- Excel at customer service

Roles

- Welcome to office (check-in)
- Appointments
- Follow-up
- Referrals
- Communication with patients and practice
- Check out



Front Office or Back Office







Back Office

Characteristics

- High performing
- Organized
- Efficient processes
- Manage office flow
- Know impact of CAHPS' questions
- Timely communication
- Excel at customer service

Roles

- Welcome to office (check-in)
- Appointments
- Follow-up
- Referrals
- Communication with patients and practice
- Check out



Patient Satisfaction Influencers

- Welcome the patient first!
- Patient interest or need
- What do you have in place to remember each person?
- "THE PACKET"
- Office behavior



"The Dreaded Packet"

Are areas
Is the space big enough for writing? Are any areas pre- loaded with patient information? highlighted in colors other that yellow for senior
Do you have a tablet or mobile computer?



What is CAHPS?

Consumer Assessment of Healthcare Providers and Systems

- Surveys ask consumers and patients to report on and evaluate their experiences with healthcare.
- Cover topics that are important to consumers.
- Focus on aspects of quality that consumers are best qualified to assess:
 - Communication skills of providers
 - Ease of access to healthcare services
 - Wait times for appointments or in the exam room



CAHPS Questions

Wait time includes time spent in the waiting room and exam room. In the last six months, how often did you see the person you came to see within 15 minutes of your appointment time? Never, Sometimes, Usually, Always





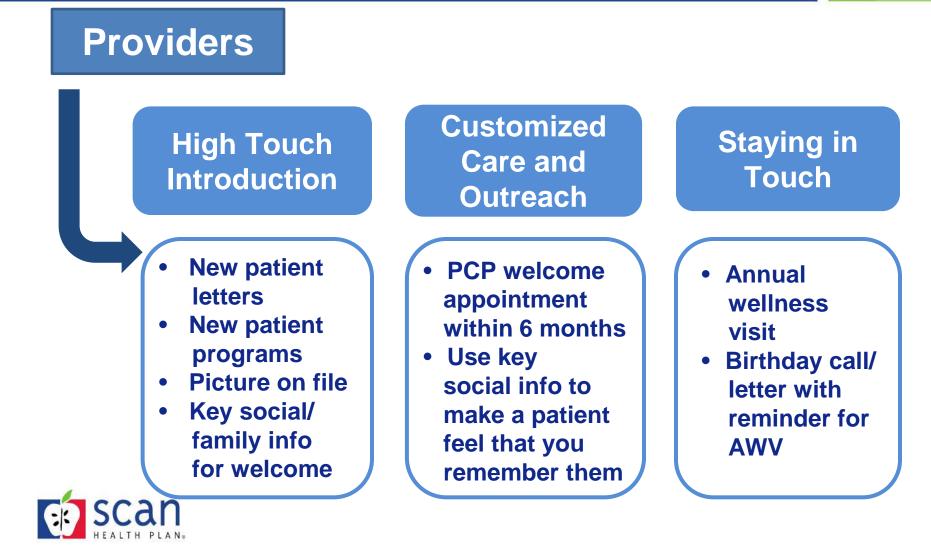
In the last six months, how often did you and your personal doctor talk about all the prescription medicines you were taking? Never, Sometimes, Usually, Always



Future State for Patient



Best Practices



Onboarding Resources

SCAN Onboarding Toolkit

- Draft welcome letters, guidelines for welcome materials, sample surveys, etc.
- Available at SCAN's Provider Portal
 - Under "Membership" tab. Zip file
 <u>https://providerportal.scanhealthplan.com/SHD_/</u>

Vendors to Support Onboarding

 Additionally, there are vendors available to support your practice with patient onboarding. Contact <u>askthetrainer@scanhealthplan.com</u> for more information.



Video





Reference link: https://www.youtube.com/watch?v=cDDWvj_q-o8



Engagement Strategies



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Adult Learners as a Challenge

- Resistant to change
- High expectations
- Need useful information
- Want time maximized
- Learn more slowly
- Question what doesn't connect



scan

Challenges

- Argumentative individual
- Loaded questions
- Long-winded
- I'm right and you're not
- No good answer



64

Engaging Participants

Using Motivational Interviewing to Engage

 It's a style of talking to people constructively about reducing their health risks and changing their behavior.



Why do we use this technique?

 It's designed to enhance the patient's own motivation to change using strategies that are empathic and non-confrontational.

- Very effective tool used in training

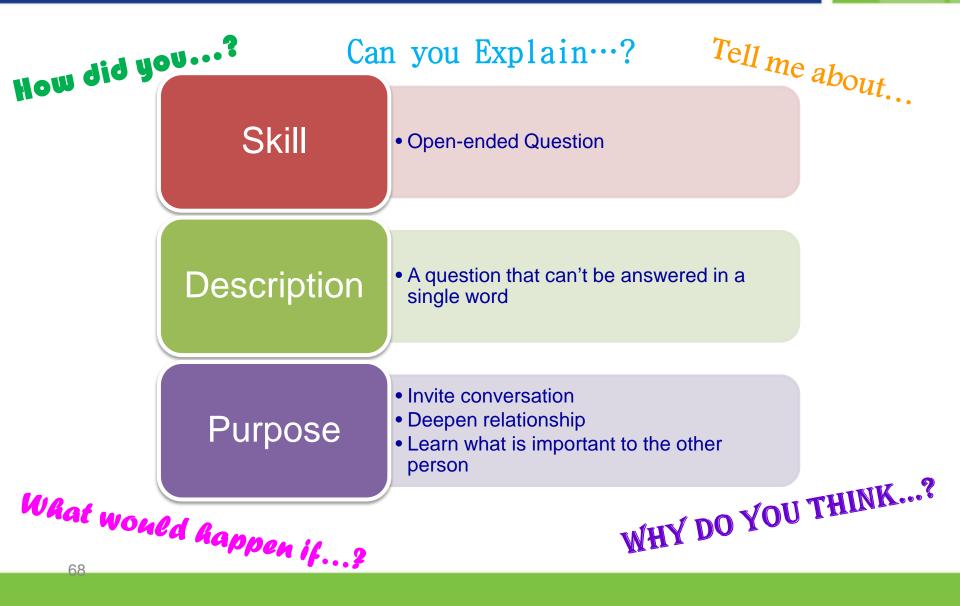


OARS



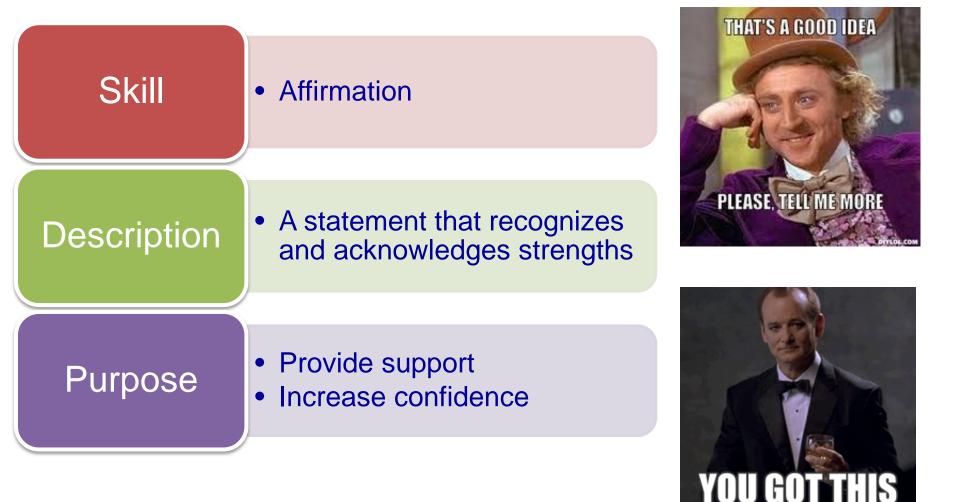
- Four basic interaction skills
 - Ability to ask open ended questions
 - Ability to provide affirmations
 - Capacity for reflective active listening
 - Ability to periodically provide summary statements to the client
- Non-judgmental, nonconfrontational & non-adversarial – JUST like education!

OARS – Open Ended Questions



You get so much more information with Open-Ended Questions <u>Sometimes more</u> information than you <u>may need</u>

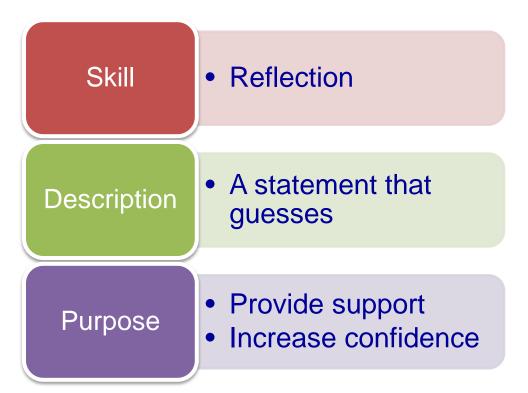
OARS – Affirmations



OARS – Reflective Listening

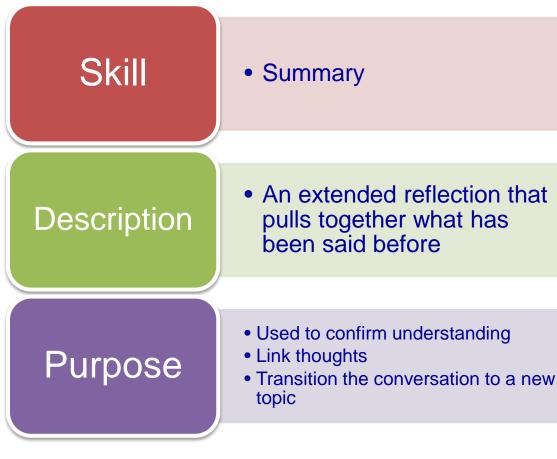
Three levels of reflective listening:

- **Repeat or rephrase:** By repeating the same words the patient says (or similar) patients may be able to hear themselves and clarify, or dive deeper into a subject.
- **Paraphrase**: Make a statement that reflects what the patient is staying.
- Reflect the feelings: You may be able to tell what a patient is feeling (from verbal or non-verbal cues) and give him or her words for those feelings



OARS – Summary





- Pull together the information you gathered in your conversation:
- Create the storyline what are the:
 - Problems/concerns/cha llenges
 - Potential solutions,
 - Patient's strengths
 - Feelings and emotions expressed



Maintaining Engagement

Engage with participants

- What are your thoughts on what we discussed?
- Ask participants to write down 3 changes they intend to make based on participating in the course.

Check In with Staff

- The process is simple: every day, approach one employee at his/her work station and ask the following questions:
 - a. What's working well today?
 - b. What do you think can be improved?
 - c. Is there anyone we should thank for extra-step service?
 - d. How can I help you perform better?

Who Am I?

References

- <u>http://theelearningcoach.com/learning/characteri</u> <u>stics-of-adult-learners/</u>
- Kuhne, Gary. "ADTED 460 Introduction to Adult Education," Penn State World Campus
- Davis, Deborah. 2012. Instructor's Manual for <u>The Adult Learner's Companion: A Guide for</u> <u>the Adult College Student, 2nd ed</u>. Boston, MA: Wadsworth, Cengage Learning.



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Let's EAT!





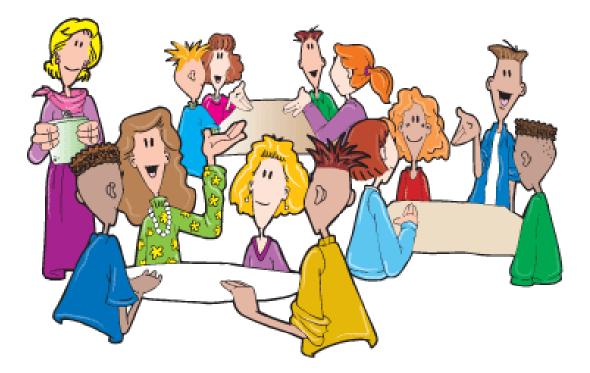


RAFFLE!





Activity Time!





Future State for Patient





Five-Star Service Is C.L.E.A.R.

Office Staff Training



Learning Objectives

By the end of the session, the participant will be able to:

- Define the five elements of C.L.E.A.R.
- Demonstrate the five fundamentals of C.L.E.A.R. communication
- Incorporate C.L.E.A.R. communication into daily practice



Customer Service

- Why is customer service so important?
 - Meeting patients' service expectations is part of everyone's job.
- How do patients judge a medical practice?
 - When patients talk about us, we want them to use words like "courteous," "friendly," "caring," "concerned" and helpful!

That's where you come in.



Video: Five-Star Service Is C.L.E.A.R.

Presenter: Barbara Khozam





C.L.E.A.R. Model for Staff Members – What to DO or SAY

C		E	Α	R		
Connect	Listen	Explain	Ask	Re-connect		
 Acknowledge patients immediately; introduce yourself "Good morning, Mrs. White, I'm Marie, I'm a registered phlebotomist. I'll be drawing your blood this afternoon." 	 Maintain eye contact No words herejust a pleasant expression! 	 Describe what's going to happen; explain as you go "Thank you for your patience, Mrs. Saldana. The Radiology tech will be here in a few minutes." "I'll be attaching these leads to your chest and legsthey may feel a little cold for a second." 	 Check for understanding "Did you get all your questions answered?" 	 Check back frequently with waiting patients "Dr. Smith asked me to let you know we haven't forgotten you. He'll be in as soon as he can." 		
 Establish eye contact; smile No words here – you know how to smile! 	 Use active listening techniques "Uh-huh." "I see" 	 Use layperson's language (not abbreviations or acronyms) "Do you have your Explanation of Benefits?" (Don't say EOB.) "Here's some information on how we respect your privacy" 	 Be sure the patient's needs have been met "is there anything else I can help you with?" "Is there something I can do to make you more comfortable?" 	 Help patients find the next location "Mr. Johnson, let me walk you to the pharmacy." 		
 Wear your name badge correctly No words here 	 Use active listening body language (smiling, head nodding) No words here 	 Let patients know when delays are expected "Dr. Jones has one other patient ahead of you. She'll be in as soon as she can. Is there anything I can do for you while you wait?" 	 Offer options, where appropriate "If this is not convenient would you like to change your appointment or see the Nurse Practitioner?" 	 End with a friendly parting comment "Take care." "Thank you for understanding. We appreciate your(fill in the blank)." 		
 Use the patient's name "Hi Mrs. White, how's my favorite patient today?" "Mrs. Saldana, please wait one second while I locate your record" 	 Repeat information for accuracy "Let's see if I've got that right" "So you've been having symptoms for two weeks, is that right?" 	 If there are tests or questionnaires involved before the patient sees the PCP explain what they are, how long they will take and what is needed from the patient. 	 Check for understanding by using teach-back method "Can you please explain that back to me, just to be sure I gave you the correct information?" 			
 Use a friendly, helpful voice/tone; say "please" and "thank you" "Could you sit on the exam table, please?" "I'm glad I could help." "Mrs. Smith, thank you for holding, how may I help you?" 	 Respond with empathy statements "Oh, I'm sorry to hear that." "That must be uncomfortable for you." 					
Office Staff Training Series: Patient Satisfaction I For more information, email practicealliance@scanhealthplan.com						

Customer Service Clip





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Let's take a break ...





RAFFLE!





Taking the H.E.A.T.

Office Staff Training



LET'S MAKE A DEAL

THE "RED BAG" CHALLENGE





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Find These Items!!!



Nose and Glasses Set





Chattering Teeth



Deck of "Go Fish" Cards

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Learning Objectives

By the end of the session, the participant will be able to:

- Define the four elements of H.E.A.T.
- Demonstrate integrating the fundamentals of H.E.A.T. communication
- Incorporate the H.E.A.T. techniques into daily practice
- Identify the types of angry patients



The Angry Patient











Types of Anger



- EMOTIONAL: personal problems..."In the line of fire..."
- SITUATIONAL: person, place, thing
- IRATE: extreme anger, enraged, irrational, intimidate
- VINDICTIVE: desire to hurt someone who has caused hurt to you – verbal or physical





Look for the Signs





BODY LANGUAGE:

- Tightened jaw
- Tense posture
- Clenched fists
- Fidgeting
- Talkative to silent
- Voice rising in pitch
- Pounding on desk

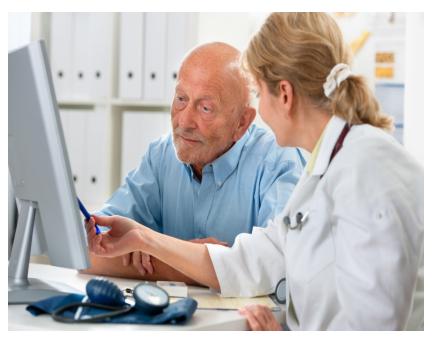
ear them out

E mpathize

A pologize

ake action







H ear them out. This is an important first step.

- Do not assume you understand why they are upset. Give them the opportunity to share their frustrations.
- Demonstrate that you are actively listening to them by asking probing questions.
 - "When/where did this happen?"
 - "Who was involved?"
- Demonstrate your understanding by paraphrasing back to them.
- Stay calm and be patient.



mpathize.

- Focus on their feelings. Respectfully acknowledge their feelings and opinions.
- Use statements like:
 - "I would be (concerned/unhappy, etc.) too, if
 _____ happened to me."
 - "That had to be a (difficult/challenging, etc.) experience to go through/have to deal with."



A pologize. Simply saying "I am sorry" can go a long way.

- Communicate with sincerity.
- Be genuine and avoid over apologizing as this can be perceived as patronizing.
- Use statements like:
 - "I am sorry you had that experience."
 - "We appreciate you bringing this to our attention and giving us the opportunity to (assist you/make it right, etc.)."



ake action

- It is important to not get defensive or take it personally.
- Focus on the issue and how you can help to resolve the concern or need.
- Take responsibility to follow-up or report the issue.
- Ask the patient about his/her desired outcome and work within policy and/or regulation to address it.
- Follow through. Set appropriate expectations on when that will occur. May need to enlist help of others in organization.



What Can You Do?

- Remain calm and professional.
- Be aware of your **non-verbal behavior**:
 - ✓ Maintain direct eye contact.
 - ✓ Just listen and keep your distance.
 - ✓ Don't get into a "combative state."
 - ✓ If patient is standing, stand!
 - ✓ If patients is sitting, sit!
- Speak softly and use patient's name.
- Move the patient to a private area.
- DOCUMENT COMPLAINTS.





CASE STUDY





Losing Our Cool





"Oh, no... Here he comes!"

"Oh, no, here comes Mr. Lane, and he looks very irritated. He was so furious on the phone yesterday when I told him that the doctor could not fix his billing statement and he would have to come into the office to meet with our account manager, Marcie.

No one knows where Marcie has gone and Mr. Lane has been in the reception area for 25 minutes just waiting.

I have been watching him out of the corner of my eye, and his face continues to get redder. I am worried about his blood pressure.

The office manager is at lunch, the waiting room is full – WHAT AM I GOING TO DO?!"



ear them out

E mpathize A pologize T ake action







Let's Review

Take the H.E.A.T.	Answers	Appropriate Action
		a) Say "I am sorry."
1) Hear them out		b) Respect the patient's feelings and
		opinions.
2) Empathize		c) Follow up or report issue.
		d) Ask questions: When, where, who?
3) Apologize		e) Stay calm and be patient.
3) Apologize		f) Communicate with sincerity.
		g) Have compassion for the patient's
4) Take action		situation.
		h) Don't get defensive.



And the Answers Are...

Take the H.E.A.T.	Answers	Appropriate Action
	d, e	a) Say "I am sorry."
1) Hear them out		b) Respect the patient's feelings and
		opinions.
2) Empathize	b, g	c) Follow up or report issue.
		d) Ask questions: When, where, who?
3) Apologize	a, f	e) Stay calm and be patient.
3) Apologize		f) Communicate with sincerity.
	c, h	g) Have compassion for the patient's
4) Take action		situation.
		h) Don't get defensive.



Discussion





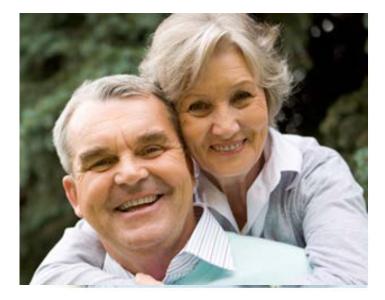
Activity Time!





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OST Implementation Reward Program

Train the Trainer

9/27/2017



Program Goal

To reward participating Provider Partners who demonstrate excellence in implementing and / or enhancing their office staff training programs, which aligns with SCAN's commitment to improving the member experience.





Program Eligibility

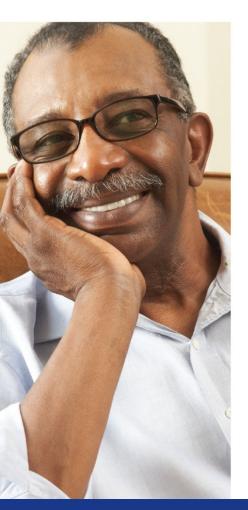
To be eligible for the OST Implementation Reward, Provider Partners must:

Attend SCAN's Train the Trainer Conference

- □ Identify an OST Implementation Champion
- □ Submit the Program Verification Form
- □ Return the signature and acceptance page



Reward Dollars



The top 5 performing Provider Partners will be eligible to receive up to \$5,000 to support ongoing Office Staff Training activities in 2018 and beyond!



Scorecard Matrix

Criteria	Needs Development (5 Points)	Well Placed (10 points)	Outstanding (25 points)
Level of Innovation Level of effort, time, and resources used to implement training	Limited implementation plan developed (e.g., team developed, project team meetings scheduled/completed, initiated training plan)	Moderate implementation plan developed (e.g., project team has met, implementation plan has been partially executed)	Complete implementation plan developed (e.g. has 2018 training calendar)
Reach Number of Trainings Delivered	Completed 1 – 3 trainings	Completed 4 - 6 trainings	Completed 7+ trainings
Participation Total number of attendees per course*	<50 attendees	50 – 99 attendees	100+ attendees
Documentation Attendance Sheets	Submit at least 50% of attendance sheets for all complete trainings to SCAN	Submit 100% of attendance sheets for all completed trainings to SCAN by 2/14/17	100% of attendance sheets submitted to SCAN within 7 days of each training
Feedback Participant Surveys	Submit at least 50% of all participant surveys to SCAN	Submit 100% of all participant surveys to SCAN by 2/14/17	100% of participant surveys submitted to SCAN within 7 days of each training



Timeline

September 27, 2017	Train the Trainer Conference	
October 4, 2017	Signed Agreement due to SCAN	
September 28, 2017 – January 31, 2018	Measurement Period	
September 28, 2017 – January 31, 2018	Provider Partner/SCAN Advisory Meetings	
October 27, 2017	OST Implementation Champion identified	
February 14, 2018	Program Verification Form due to SCAN	
February 14, 2018 – February 28, 2018	Evaluation Period	
March 2018	Reward Payout	



SCAN Resources

To support Provider Partners in this effort, SCAN will offer ongoing support in developing and implementing an OST program within each organization.

askthetrainer@scanhealthplan.com

https://scanhealthplan.com/providers/train-the-trainer





Patient Satisfaction: Practical Solutions to Improve Patient Experience

Webinar

SCAN hosted and presented by Andrew Golden, MD

November 9th | 12 pm – 1 pm

CME: This webinar has been approved for 1 CME

Email invitation to follow.



Physicians as the Care Team Manager to Ensure Maximum Patient Flow Before and After the Visit

- The importance of waiting times and its impact on patient satisfaction
- Solutions and best practices that promote a positive patient experience
- Effective collaboration with office staff to maximize every patient interaction
- Setting expectations in both the waiting and exam room



Email: Askthetrainer@scanhealthplan.com for registration information.



Closing

Michelle Fujii, MHA

Manager, Medicare Star Quality



FINAL RAFFLE!





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