



Welcome!

Train the Trainer Conference Series

2/28/2018



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.



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.



- 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.





Agenda

8:30 am – 9:00 am	Breakfast/Registration
9:00 am – 9:15 am	Opening Remarks
	Romilla Batra, M.D.
	Chief Medical Officer
	Pre-conference raffle
9:05 am – 10:00 am	Significance of Staff-Patient communication
	Barbara Khozam
	Keynote Speaker, SullivanLuallin Group
10:00 am – 11:00 am	Presentation: Upping the Ante on Engagement
	Robi Hellman, RN, MSN, CNS
	Director, Health Care Services Education and Training
	Renee McNally
	Health Care Services Trainer
11:00 am – 11:15 am	Break
	Raffle
11:15 am – 12:00 pm	Presentation: Care Coordination Training
	Robi Hellman
12:00 am – 12:30 pm	Lunch

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Please silence your cell phones

Agenda

12:30 pm -12:45 pm	VIP recognition
	Michelle Fujii, MHA
	Manager, Medicare Star Quality
	The Importance of Partnership for Medication Adherence Success
	Bill Roth
	President, Chief Operating Officer
12:45 pm – 1:15 pm	Medication Adherence Scavenger Hunt
1:15 pm – 2:00 pm	Presentation: Medication Adherence Training
	Robi Hellman
2:00 pm – 2:15 pm	Break
	Raffle
2:15 pm – 2:45 pm	Visual Mission Statement
2:45 pm – 3:00 pm	Closing remarks
	Sherry Stanislaw
	SVP, General Manager
	Final raffle

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!











Train the Trainer Romilla Batra, MD

February 27, 2018

Quadruple AIM





The Clinical Case for Improving Patient Experience

- At both the practice & individual provider levels, patient experience positively correlates to processes of care for both prevention & disease management. For e.g, diabetic patients demonstrate greater self-management skills and quality of life when they report positive interactions with their providers (1,2).
- Patients' experiences with care correlate with adherence to medical advice & treatment plans, especially among patients with chronic conditions.(3.4)



^{1.} Sequist TD, Schneider EC, Anastario M, Odigie EG, Marshall R, Rogers WH, et al. Quality monitoring of physicians: linking patients' experiences of care to clinical quality and outcomes. J Gen Intern Med. 2008; 23(11):1784–90.

² Greenfield S, Kaplan HS, Ware JE Jr, Yano EM, Frank HJ. Patients' participation in medical care: effects on blood sugar control and quality of life in diabetes. Journal of General Internal Medicine 1988; 3:448-457.

³ DiMatteo, MR. Enhancing patient adherence to medical recommendations. JAMA. 1994; 271:79-83.

⁴ DiMatteo MR, Sherbourne CD, Hays RD, et al. Physicians' characteristics influence patients' adherence to medical treatment: results

How are we being measured?

CMS Surveys

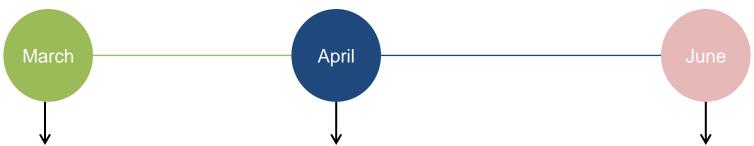
CAHPS (Consumer Assessment of Healthcare Providers and Systems)

- Conducted by a third party vendor via mail and phone between March and June.
- Asks members about aspects of quality, such as provider communications skills and ease of health care services
- Surveys a random sample of 800 members who have been eligible with the plan for at least 6 months.

HOS (Health Outcomes Survey)

- Conducted by a third party vendor via mail and phone between April and June.
- Asks members about the care they receive from their healthcare providers to measure health care outcomes and effectiveness of care
- Surveys a random sample of 1,200 members and a followup survey to members who responded two years prior

CAHPS Timeline



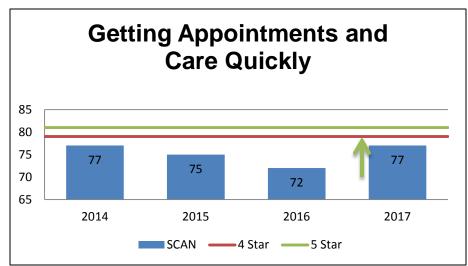
- Early March:
 CAHPS Pre notification letter
 mailed to all
 sampled members
- Mid March: Mail out of the first questionnaire
- Survey fielding starts

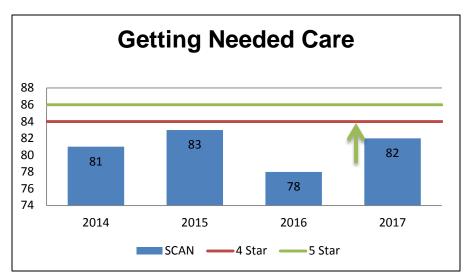
- Mail out of the second questionnaire
- Computer assisted telephone interviews for non-respondents to the mail survey begin

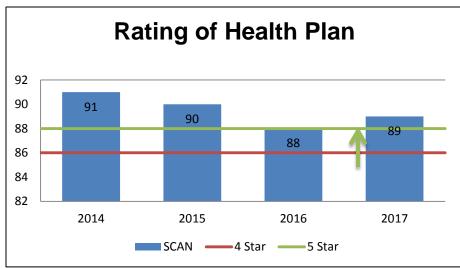
- Cutoff for returned mail surveys
- Telephone surveying concludes
- Survey fielding concludes
- Mid June: Final data files sent to CMS

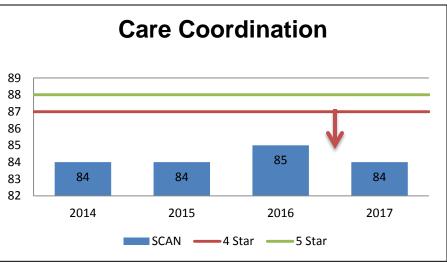


SCAN 4 Year Star CAHPS Trends











What is SCAN doing with CAHPS?



SCAN Interventions

- CAHPS/HOS Webinar
- April Quality Symposium
- Office Staff Training
- Physician Training

Provider

Member

- Customized Health Check Record
- SCAN Club Newsletter
- Teletalks
- SCAN Listens and Voice of the Customer



2017 Office Staff Training Recap



Provider groups trained

• 13

Total number of trainings

• 160

Total number of staff/providers trained

• 3,000+

Participants Survey Average Rating

• 9.4

Physician Training Now Available in Addition to Office Staff Training



Speaker Contact Information

Romilla Batra, M.D. – Chief Medical Officer at SCAN Health Plan

RBatra@scanhealthplan.com



BINGO!









Significance of Staff-Patient Communication

Barbara Khozam Senior Consultant, SullivanLuallin *Group*





Program Objectives

Workshop participants will:

- UNDERSTAND the importance of staff-patient communication
- LEARN proven techniques for engaging patients in their care
- LEARN proven techniques for successfully disengaging with patients at the end of their visit
- PRACTICE tools to make lasting changes





Barbara N. Khozam, B.S.



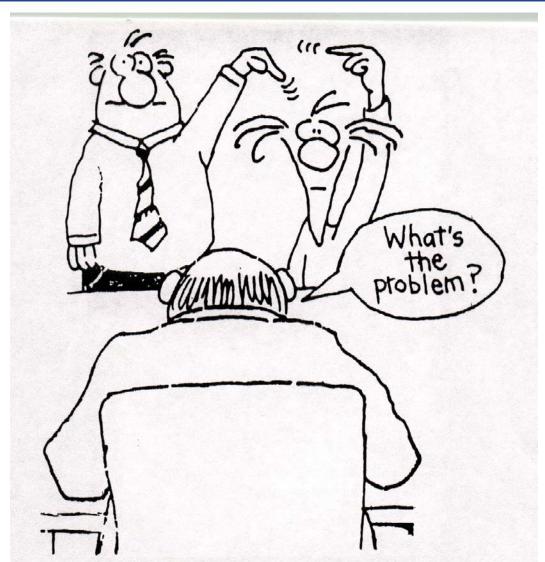


- B.S. in Chemistry
- Worked with SullivanLuallin Group for over 9 years
- Internationally recognized speaker
- Delivered trainings to over 37,000 employees and executives in 10 countries
- Author of "How Organizations Deliver BAD Customer Service (And Strategies that Turn it Around!)"
- Delivered more than 1,500 presentations to audiences of all sizes, sharing great strategies on customer service, leadership, motivation, and communication with difficult customers and coworkers











Sullivan Luallin Group

The Patient Experience Transformation Company

- t
- Effective communication helps engage patients in their care
- Proper communication results in a more pleasant healthcare experience for both patients and staff.







- Poor communication undermines efforts caring for the elderly
- Americans 65 and older will comprise 20 percent of the nation's population by 2030
- Seniors visit doctors an average of 8 X per year
 - general population average 5 X per year







Older patients ...

- ... may be scared
- ... may not want to bother you
- ... may not fully understand what you are talking about
- ... may be afraid to be seen as a complainer
- ... may not feel comfortable "talking back" to medical professionals
- ... may have memory and cognitive disturbances.













Focused communication is:

- Connect
- Listen
- Explain
- Ask
- Re-connect





Connect

- Acknowledge patients immediately
- Use eye contact and SMILE
- Wear your name badge so patients can see it and read it
- Use the patient's name
- Respond to the patient's request with, "I can help you with that."
- Say please and thank you







- Use eye contact and a pleasant expression
- Use head nods to indicate that you're paying attention
- Don't interrupt
- Make a note of what the patient is telling you
- Repeat information for accuracy





Listen

- Respond with an empathy statement
 - "That must be frustrating..."
 - "I'm sorry to hear that..."
 - "I can understand..."

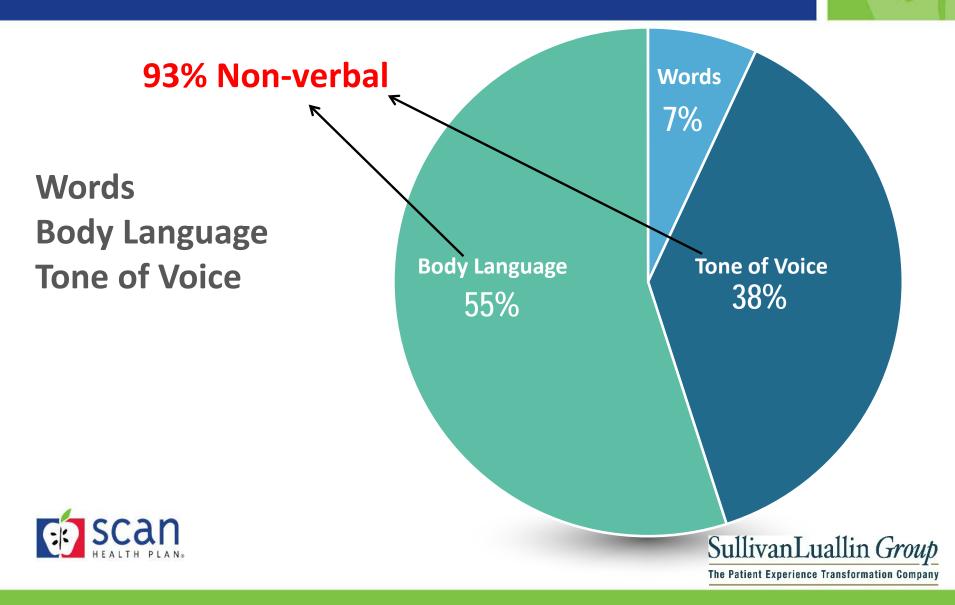


























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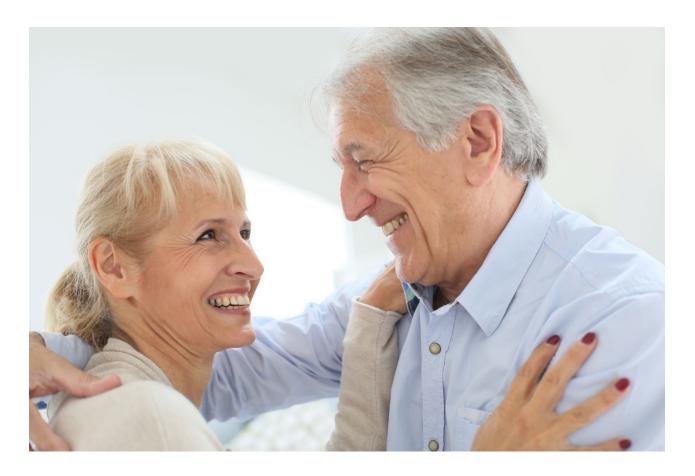
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- Tell patients what you're doing
- Use layperson's language
- Remind them of important details of their self-care
 - Help develop a medication schedule
 - Go over health literature
 - Write down instructions





Name and Dose of Your Medicine	This Medicine is for my	Morning	Noon	Evening	Bedtime	Reminder: When do I take it?
Example: Simvastatin 40 mg	Example: High cholesterol	Example: pill	711°		M	Example: After I brush my teeth

If you have any problems with your medicine - do not wait. Talk to your health care provider right away.

	Name of Primary	Primary Care Provider
Patient Name:	Care Provider:	Phone Number:







- Repeat details to confirm accuracy
- Ask if the patient's needs were met
- Ask if the patient has any other questions
 - "What is your understanding of what we talked about?"
 - "What other questions can I answer for you?"
 - "Is there anything else I can do to make you comfortable?"
 - "Is there anything else I can help you with?"





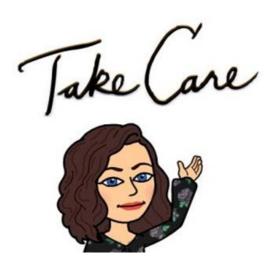






Re-connect

- When patients thank you, respond, "You're welcome," or "My pleasure."
- End on a positive note; tell patients, "Take care."







Recap

- Who is responsible for delivering focused communication?
- When a patient is talking, the best thing I can do
- The more I explain, the less they

Last impressions are _____







Activity





Questions?



Barbara Khozam
Senior Consultant
SullivanLuallin Group
Barbara @SullivanLuallinGroup.com









Upping the Ante with Engagement

Robi Hellman, RN, MSN, CNS Renee McNally



"You have to earn the right to be a part of your audience's conversation." (unknown)



"Engagement is the step beyond participation."

(Kindling Spirits – Brains on Fire)



What is Engagement?



Rowing in the Same Direction





Learning Objectives

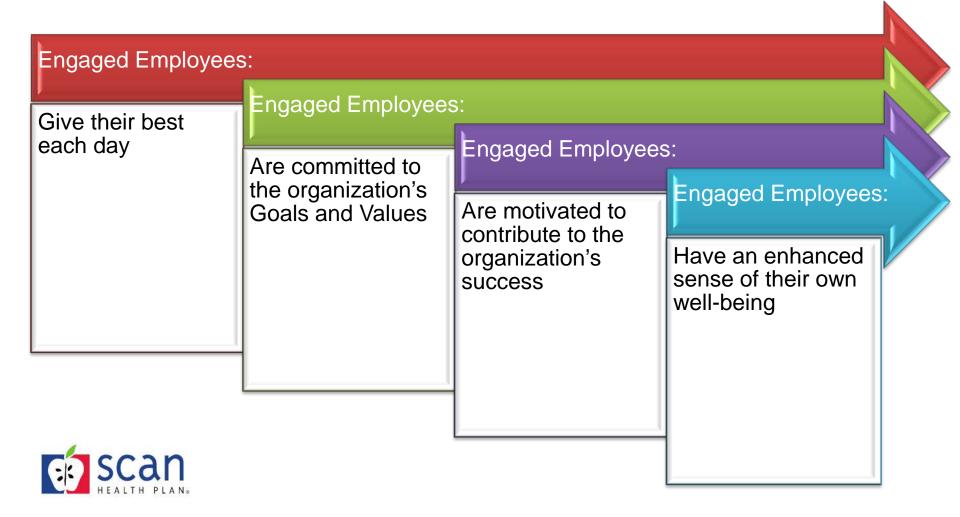
By the end of this session the participant will be able to:

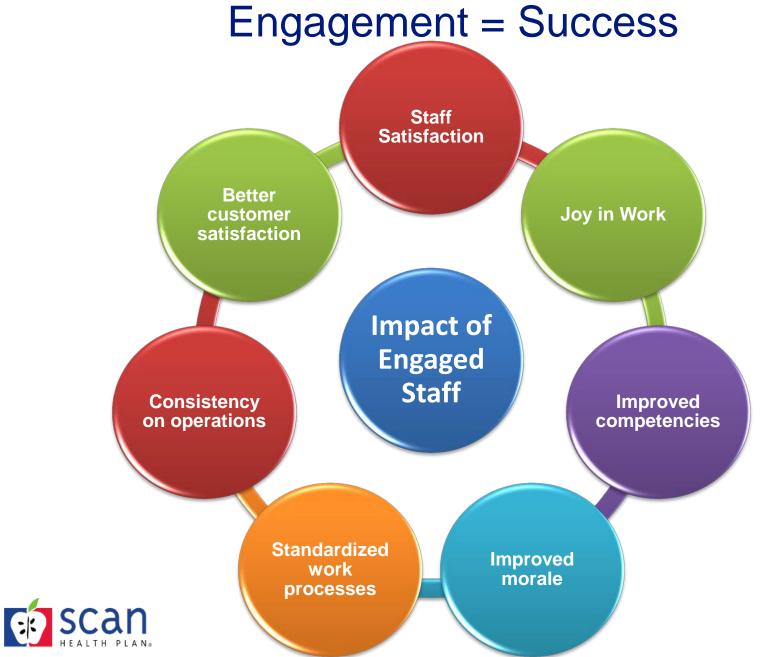
- Identify the 5 specific intrinsic motivators that have the most impact on engagement
- Describe the impact of engaged staff
- Assess the level of engagement for individual staff





What is Staff Engagement?





Improving Staff Engagement



Identify impediments

Commit to a systems approach

Use improvement techniques

Setting Expectations

Work operations

Competencies

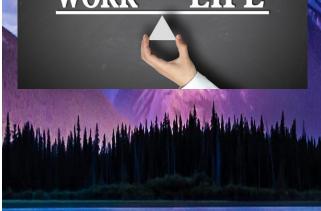
Customer service

"Tap on the shoulder"

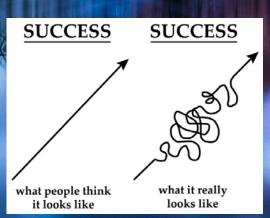


Reflection









ALENT



Behavior Influencers

I know who you are (staff/patient awareness)

I know what we have to accomplish (intended staff/patient outcomes)

I will present you with choices (fairness and support)

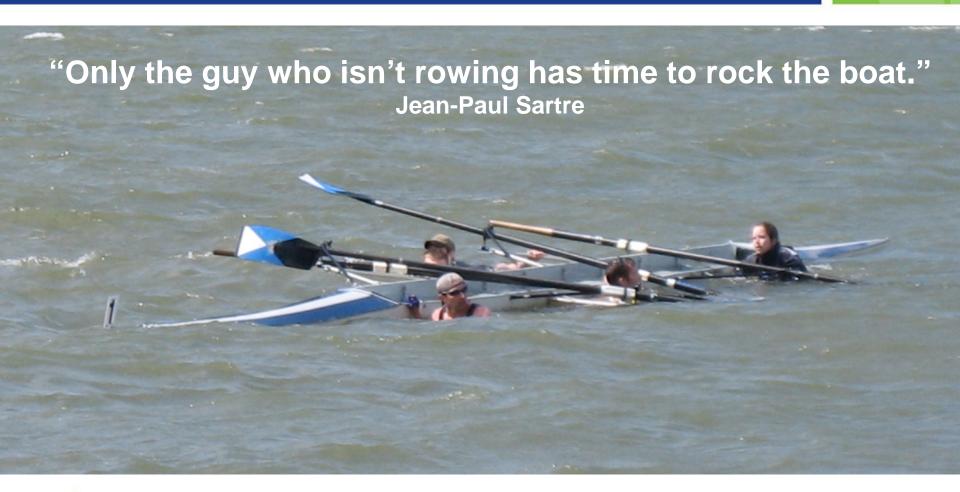
I will provide manageable information (clarity)

All ideas are important and valued (respect)

I will use our time productively (relevance)

I will help you to succeed (support)

Impact of Engagement





Focus

Clearly defined goal

a system of measurable progress toward that goal a notion of increased status when the goal is reached and

meaningful rewards for achieving the goal



Staff Engagement

I know what is expected of me at work.

Employee Expectations



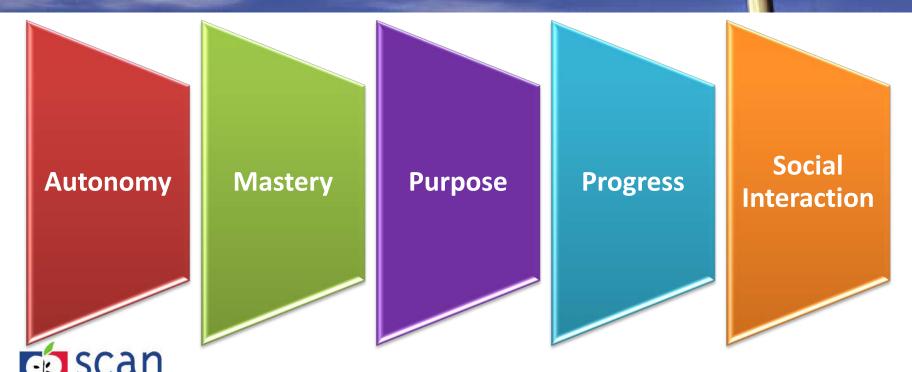
I have the materials and equipment I need to do my work right.

At work, my opinions seem to count.







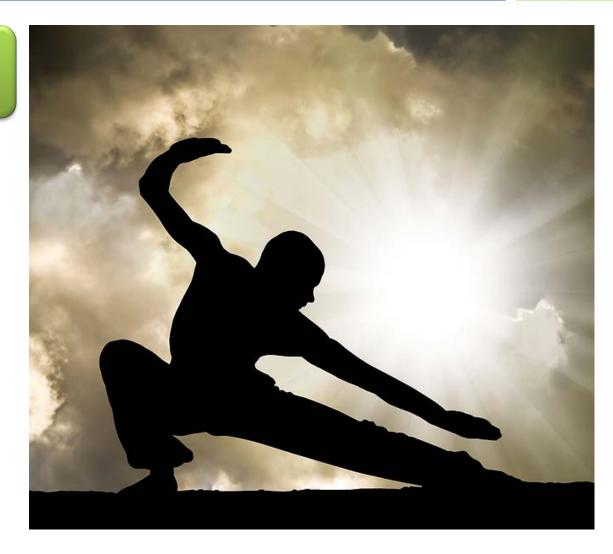


Autonomy



Mastery

"I improve."





Purpose

"I Make a Difference"



Progress

"I Achieve"



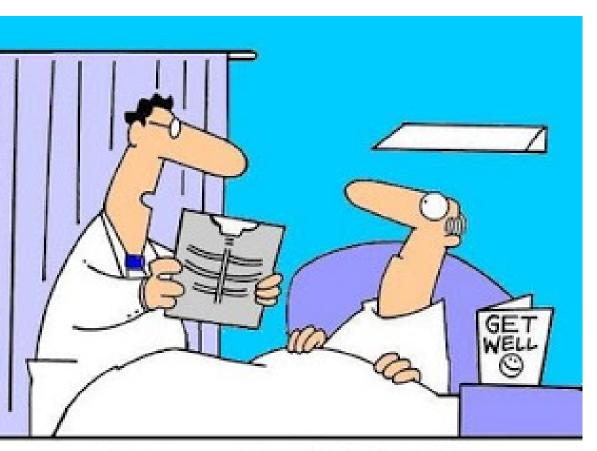
Social Interaction







Opportunities for Engagement

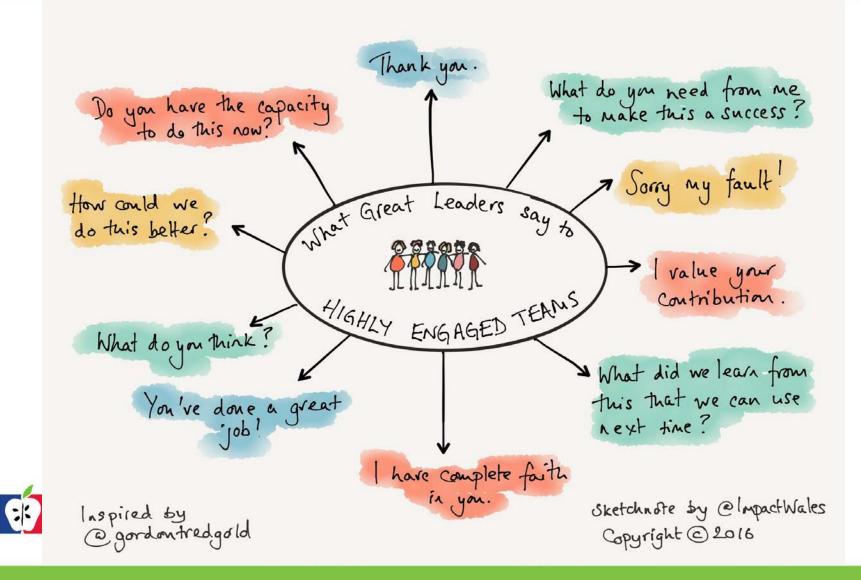


"Your x-ray showed a broken rib, but we fixed it with Photoshop."

- Where is your team's biggest real opportunity?
- What problem does your team need to solve?



What Great Leaders Say.....



Role Play



Role Play



- Spoke with supervisor multiple times about growth & financial opportunities
- Supervisor complimentary & supportive but no opportunity offered
- Employee doesn't feel like sup is supporting their growth
- Starting wearing suits every day so it didn't look strange when she had to go to interviews
- Actively looking for new employment OUTSIDE of the organization

Supervisor Story:

- Has always been a model employee; highly productive
- Recently not as happy, isn't approaching tasks with usual enthusiasm over the last 3 months
- Recently changed dress to look highly "professional"

Where is your team?

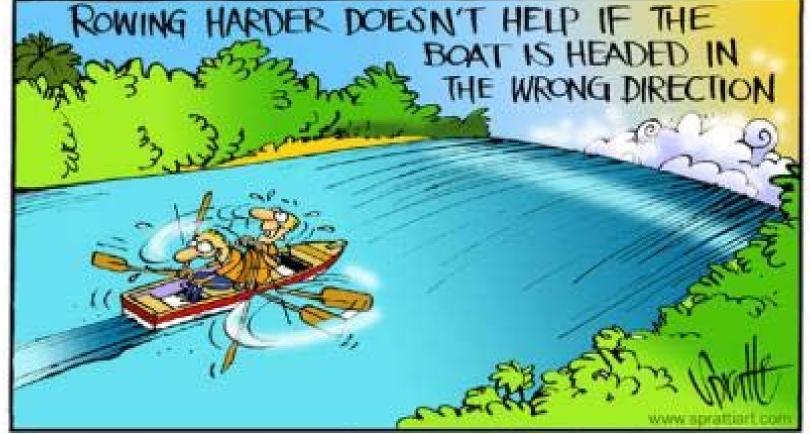




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Feedback and Check-ins





Rowing in the same direction



Rowing Forward

Congrats for attending and learning new strategies

Great teamwork!

Demonstrated expertise!

Here's the challenge:

Keep up with compliance needs while balancing quantity needs

Engaging staff at new levels to improve outcomes





References

- What Is Employee Engagement
 https://www.forbes.com/sites/kevinkruse/2012/06/22/employee-engagement-what-and-why/#60d3f4557f37
- Engage for Success http://engageforsuccess.org/what-is-employee-engagement
- https://elearningindustry.com/11-tips-engage-inspire-adult-learners
- https://www.forbes.com/sites/joefolkman/2014/04/02/mood-andengagement-are-contagious/#7566d4235529
- Perlo J, Balik B, Swensen S, Kabcenell A, Landsman J, Feeley D. IHI
 Framework for Improving Joy in Work. IHI White Paper. Cambridge,
 Massachusetts: Institute for Healthcare Improvement; 2017.



6

Let's Take a Break ...





RAFFLE!









Care Coordination

Robi Hellman



Learning Objectives

The participant will be able to:

- Define CAHPS.
- Identify the difference between **patient experience** and **patient satisfaction**.
- Describe the impact of the patient experience on healthcare.
- Discuss the 5-Star quality measures related to Care Coordination.



What Is CAHPS?

Consumer Assessment of Healthcare Providers and Systems

Survey that asks **consumers and patients** to report on experiences with healthcare services in different settings





Improving Patient Experience

- CAHPS = quality improvement tool
- Standardized data is used to:
 - Identify strengths and weaknesses in the performance of providers and staff.
 - Determine where there needs to be improvement.
 - Track the providers' progress over time.





CAHPS Survey Questions

- How often was it easy to get appointments with specialists?
- How often did you see the person you came to see within 15 minutes of your appointment time?
- How often did you and your personal doctor talk about the prescription medications you were taking?



Patient Experience Versus Patient Satisfaction

Patient Experience

- Range of interactions:
 - Getting timely appointments
 - Easy access to information
 - Good communication with providers

Key Issue:

Care that is respectful and responsive to patients' needs





Patient Experience Versus Patient Satisfaction

tion

Patient Satisfaction

- Patient expectations:
 - How patients feel about care received
 - Healthcare encounter
 - Based on delivery of care

Key Issue:

No two patients will give the same rating for the same care received.





What Is the "Patient Experience"?











Patient-Centered Care

Definition:

- Caring for patients and their families
- Individualized care that is meaningful and valuable
- Includes listening, informing and involving patients
- Care that is respectful and responsive
- Care that meets needs and values and ensures patient values guide all clinical decisions



Eight Principles of Patient-Centered Care

1. Respect for patients' values, preferences and expressed needs

2. Coordination and integration of care

3. Information and education

4. Physical comfort

5. Emotional support and alleviation of fear and anxiety

6. Involvement of family and friends

- 7. Continuity and transition:
- Clear, detailed information
- Coordinate and plan ongoing treatment and services postdischarge
- Access to clinical, social, physical and financial support

- 8. Access to care:
- Specialist or specialty services
- Location to hospitals, clinics and physicians
- Availability of transportation
- Ease and availability of scheduling appointments

5-Star Best Practices



5-Star Quality Rating

Centers for Medicare and Medicaid Services

Open communication

Effective coordination

Timely access



5-Star Best Practices: Care Coordination





Order tests: blood, X-ray



Prescription medication review



Train staff



Recommendations from specialists



Communication about test results



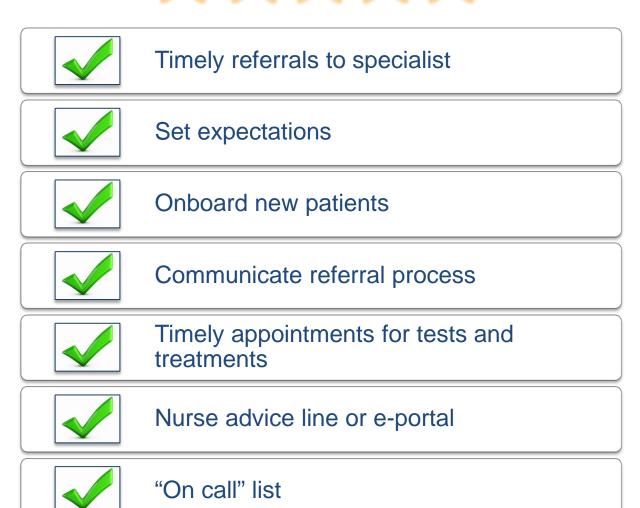
Patient portal



Medical history review



5-Star Best Practices: Getting Needed Care



5-Star Best Practices: Getting Appointments and Care Quickly





Urgent or non-urgent appointments



Schedule appointments early



Nurse practitioner/physician's assistant



Triage patient calls: office or virtual visits



Patient portal: office phone number, afterhour phone number



Provide support with referrals and authorization process



"15-minute" timeframe



Optimal Experience

What all patients want:

- Confidence
- Integrity
- Pride
- Passion



Questions







RAFFLE!







Lunch time!









Office Staff Training – Reward Program

Reward Program

- Description: Deploy SCAN's Office Staff
 Training courses within your organizations
- Program Timeline:

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



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

 Develop a training plan and schedule training earlier in the year





 Don't wait until the end of the year to start planning





- Provide training through different avenues:
 - Webinars or WebEx
 - Leverage existing meetings
 - Incorporate into new employee onboarding training





 Collect feedback after training to help aid in improving future trainings

Develop a training meeting agenda help trainers facilitate training

Ice Breakers- 5 minutes- Select one of the followings:

- a. If you could meet any historical figure, who would you choose and why?
- Pick something out of your pocket or purse and share with the group why it's important to you.
- c. Ask the group: What would you do if you have 1-2 hours wait time at your doctor office? Attendees will stand up and go to designate location of depending on their responses:
 - a. To stay with the doctor and respond negatively on patient survey
 - b. To find another doctor
 - c. To do nothing and stay with the doctor

Workshop: 55 minutes

- a. Training Objectives
- b. Survey process
- c. Define Patient Satisfaction
- d. Why does Patient Satisfaction matter?
- e. Five key factors impacting patient satisfaction
- f. CLEAR model discussion
 - i. Show video 25 minutes
- g. HEAT model discussion
 - i. Role playing activities 10 minutes
 - ii. Show "Empathy- The Human Connection" video Cleveland Clinic 5 minutes
- h. Other tools
- i. Review Objectives
- j. Workshop Evaluation from attendees





Market trainings to staff via flyers and other materials

VIP Recognition – Silver Award

HealthCare Partners – Region 6 IPA

High Desert

MemorialCare Medical Foundation



VIP Recognition – Gold Award

Monarch

St. Joseph Heritage







The Importance of Partnership for Medication Adherence Success

Bill Roth President, Chief Operating Officer



Ready for an adventure?











Medication Adherence

Robi Hellman



Learning Objectives

The participant will be able to:

- Describe the lifestyle of seniors.
- Identify the challenges of medication adherence.
- Utilize assessment skills to identify and manage medication non-adherence.
- State the reasons for non-adherence.
- Demonstrate solutions to increase the ability for seniors to achieve

adherence.



Lifestyle Profile of Seniors

Brief overview of lifestyle:

- Family and friends
- Work/retirement/travel
- Exercise/nutrition
- Social interaction
- Health issues:
 - Physical
 - Cognitive abilities
 - Medications and independence





Medication Adherence

What does it mean to be adherent?

 Taking medications at the right time, the right dose and the right way as the doctor has prescribed

Why is adherence so important?

- Improves patient health
- Keeps patients out of the hospital
- Keeps healthcare costs low
- Maintains patients' optimum health





Challenges



Challenges

Directions

Different colors

Pill bottles

Types of medications

Prescriptions

Schedules

Assistance



Assessment

The most critical element to medication adherence success is overall **patient assessment**:

- Physical strength
- Cognitive abilities
- Health literacy



Physical Strength

Can patients do any or all of the following alone or with assistance?

- Open a container (box or bottle)
- Cut their own food
- Get dressed, take a bath, brush teeth
- Use a cane, walker, wheelchair
- Get to the doctor's office or pharmacy
- Read or hear directions



Cognitive Abilities

Physical strength is important but so is **brain power**, also known as **cognitive abilities**:

- Mental acuity
- Comprehension
- Non-verbal behavior
- Dementia/Alzheimer's





Health Literacy

DEFINITION:

How patients can understand and act on health information

ASSESSMENT:
The Newest Vital Sign (NVS)





The Circle of Non-Adherence



PHYSICAL STRENGTH

"I forget to take (or refill) my medication!"

"The bottles are too hard to open!"

NON-ADHERENCE

ASSISTANCE

"I don't think I need it any more! I feel better!"



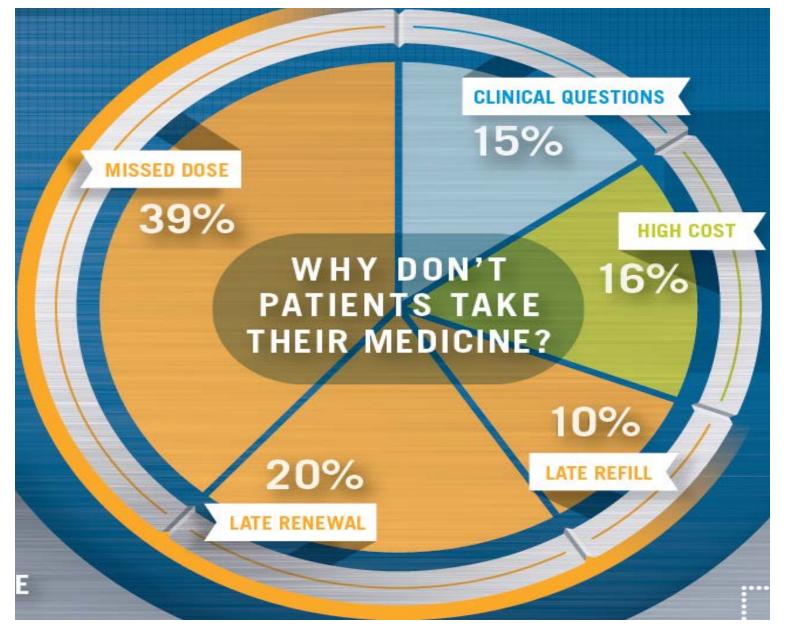


"It costs too much to buy my medicines!"

EDUCATION

"I am not sure how to take my medicine!"

"I am having a side effect to my pills!"



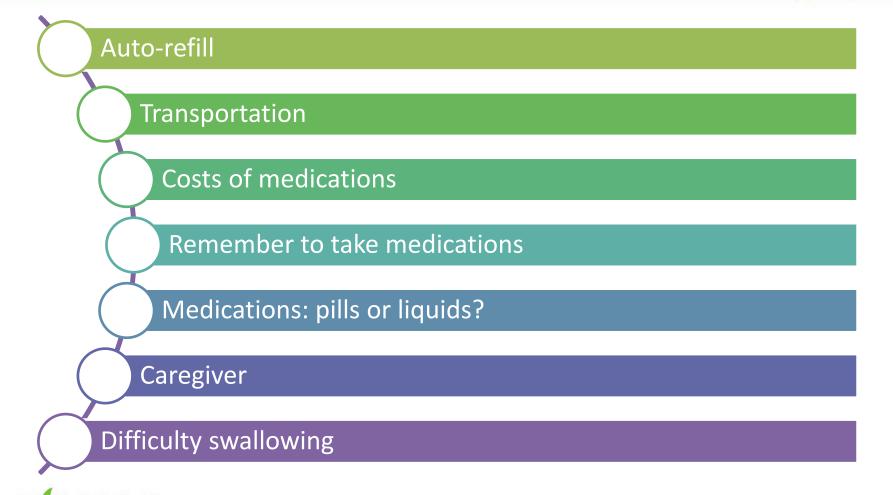


Solutions to Increase Adherence

- Pill boxes and calendars
- Refill programs
- Buy generics
- Alternative payment plans
- Home delivery
- Synchronization
- Transportation assistance
- New generation: phone alarms, text reminders, calendar updates
- Education
- Involve caretakers



Questions to Ask Patients



Final Notes

- Encourage patients to take a list of meds to doctor appointments:
 - Prescribed & OTC medications
 - o Vitamins
 - Herbal supplements
 - o Teas
 - Medical marijuana
- Medications should be reviewed at least once a year by their PCP. Advise patients to keep an updated medication list with them always.





Final Notes

Warnings to Patients:

- Stop medication when discontinued.
- Follow doctor instructions regarding new medication.
- Use one pharmacy to ensure continuity of medications.
- Ask pharmacist how to dispose of old medications.







To maintain independence and optimal health, patients will:

Properly manage medications to prevent overdosing or under medicating.

Decrease number of ER and hospital visits.

Have reduced stress and anxiety.

Leverage SCAN resources.



Questions





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Break







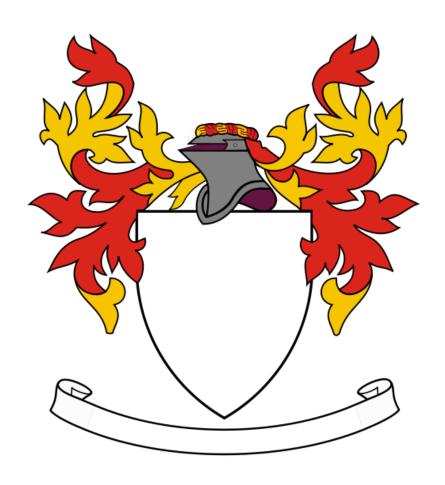
RAFFLE!







VISUAL MISSION STATEMENT









Closing

Sherry Stanislaw

Senior Vice President, General Manager



FINAL RAFFLE!





