CCALAC Care Team
Dancing As A Patient Care Team – Part 2
March 31\textsuperscript{st} & April 2\textsuperscript{nd}
Your Trainers:

Harpreet Sanghera
Sacramento, CA

Project Manager, Process Redesigner & Trainer. Sacramento, CA. Harpreet truly enjoys the California sunshine, which is why she was born, raised, and hasn’t left the state. She was a Clinic Manager at a Federally Qualified Health Center (FQHC) right outside Sacramento, CA. She started as the front office lead, worked as a Medical Assistant and Flow Coordinator. Harpreet also worked on her Quality Improvement team at her health center, and she is a graduate of the Clinic Leadership Institute (CLI) Program. Before becoming a process redesigner, she went through a Rapid DPI™ at her health center when she excelled and learned how to manage change and become a coach herself. With Coleman, Harpreet manages Rapid DPI™ projects, DPI™ collaboratives, leads the High Impact Management Program, leads many phone room redesign projects, and was a key Coach aka Passion Ignitor in redesigning immigration and naturalization services.
Your Trainers:

Brizzia Burgos
Longmont, CO

Logistical Team Coordinator and Vroom! Administrator.
Longmont, CO. Brizzia has been a mainstay in the Coleman family for over six years, leading the development and streamlining of our materials and production. Brizzia serves as the Coleman direct client support and administrator of Vroom! our online training platform (www.Vroom.Training). Brizzia is in charge of materials design, duplication, and shipping for all learning sessions which is a fancy way of saying that she has to catch all of the crazy requests and ideas flowing from her colleagues and turn them into tangible tools and get them where they need to go. She also handles all website updates, data reviews, webinar coordination, including all translation coordination for our Spanish language website. Brizzia provides direct support to the CEO and provides overall backup to the Associates.
Learning Objectives

- Participants will recognize the principles of great communication.
- Participants will summarize best communication examples for patients and staff.
- Participants will apply the learned information to their own scheduled communication.
Preparing for a New Normal Considerations:

• Well-coordinated execution
• Protective and reassuring for patients and staff
• Able to meet the needs of your communities
Your New Visit Model

1-2 Days Before

1 Day Before

Day Of Appt.

Care Team Huddles

Provider, MA’s, Front Desk

Financial Preparatory work done

Eligibility verified
Eligibility notes made in EMR

Clinical Preparatory work done

Visit Prep done
Robust Confirmation Calls done
Notes made in EMR

On time start

QuickStart

Team Dance

Jockey the Schedule
Red Carpet the Patient
Robust Intake
30-Second Report
Charts At Time of Visit
Cuddle/Debrief
Sheep and Shepherd
Today’s Takeaways

- Midway Knock
- Communicating with Staff
- Communicating with Patients
Steps in the Team Dance

- Robust Confirmation Calls
- Visit Prep
- PCT Huddle
- QuickStart
- Jockey-ing the Schedule
- Red Carpeting
- Robust Intake
- 30-Second Report

- Sheep & Shepherd
- Red Carpet Exit
- Charting in Real Time
- SoftLanding
- Over Communicate

- Midway Knock
The Team Dance Steps

Each of you is a unique component of your team. Together your team can work more or less optimally together…

The Team Dance teaches you the steps to optimize your work together.
The Team Dance: Midway Knock

At this point:

1. Provider gives instructions of what they need: Lab drawn, flu shot, referral, help with procedure, follow up appointment, etc...

2. MA may do a second Midway knock if needed or requested.

Midway Knock allows MA to get things done synchronously while provider finishes up visit versus waiting until the end to begin working on these tasks for this patient.
Midway Knock

- For a virtual visit, the MA and provider can decide how they would like that "knock" to take place. Perhaps it is a chat feature in the Electronic Medical Record (EMR) or a chat feature in the web platform.
Different Ways to “Knock”

- Exam Room Door
- Walkie Talkie
- Chat through the EMR or other software
THE MIDWAY KNOCK PREVENTS MAs from being pulled in too many directions.

Getting the robust intake done for the next patient

Provider looking for the MA/Nurse to hand off orders/labs/tests follow up for the current patient

Preparing and administering vaccines/treatment

Translation/chaperoning/scribing and other in room tasks

Following up on calls/messages for patients not being seen today

Making calls to patients about their appointments tomorrow

Midway Knock

- Keep the provider from having to “hunt” for their MA.
- MAs keep the provider on track and offer to provide support as well as a gentle reminder of time passed.

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Possible Midway Activities

- Initiate a referral
- Do an EKG
- Make a follow-up
- Provide a note for work or school
- Exchange information
- Give an injection
- Retrieve educational info
- Draw a lab
- The Midway Knock saves “sneaker time”

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Your New Visit Model

1-2 Days Before
- Financial Preparatory work done
- Eligibility verified
- Eligibility notes made in EMR

1 Day Before
- Clinical Preparatory work done
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Day Of Appt.
- Care Team Huddles
- Provider, MA’s, Front Desk

On time start
- QuickStart

Team Dance
- Jockey the Schedule
- Red Carpet the Patient
- Robust Intake
- 30-Second Report
- Midway Knock
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- Midway Knock
- Communicating with Staff
- Communicating with Patients

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Consistent, Clear, Accurate messaging is one of your most powerful tools.
Confusion Creates…

Fear

Paralysis

Anger
Dear [Insert Organization Name] Employees,

We want to thank you for your continued service to our patients and our communities through this trying time. We hope that you and your family are feeling healthy and well. As Michigan begins to reopen, we are writing to share what steps we are taking to keep you and patients safe in our new normal.

[Insert Organization Name] is using the current CDC guidelines and the guidelines from our state health department to guide our response. In addition to our regular cleaning schedule, we are taking the following steps to keep you safe:

- We are screening patients over the phone before they come for their appointments.
- We are screening all staff and patients that enter the facility for fever and symptoms of COVID-19. Staff responsible for screening will wear full PPE.
- Patients are being asked to come alone to their appointments or bring one caregiver when necessary.
- We have installed additional hand sanitizer dispensers.
- We are cleaning bathrooms every two hours.
- We are dividing the clinic into “sick” and “well” sides to control cross-contamination.
- Patients will be asked to wait in their cars whenever possible and the chairs in the waiting room have been spaced out to accommodate social distancing.
- We have installed barriers at the front desk to separate staff members and patients.
- We have removed all toys, reading materials, remote controls and other communal objects from the clinic.
Clinic Signage

Getting ‘Back to Normal’ Is Going to Take All of Our Tools

If we use all the tools we have, we stand the best chance of getting our families, communities, schools, and workplaces “back to normal” sooner:

- Get vaccinated.
- Wear a mask.
- Stay 6 feet from others, and avoid crowds.
- Wash hands often.

www.cdc.gov/coronavirus/vaccines

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Structuring Staff Communication

- Leadership Meetings
- Leadership Huddles
- Administrative Huddles
- Patient Care Team Huddles
Leadership meetings should happen at least once per week.

Can be separated into exec team and full leadership team.

Discuss the most pressing issues.

Decide on **key messages** for all staff about the most important issues.
Leadership Huddles

- 3-5 times per week. More frequent during emergencies, such as the coronavirus pandemic.
- No more than 15 minutes.
- All leadership.
- Report out on the most important issues and the organization’s response.
- Review and update key messages.
Administrative Huddles

- Daily before Patient Care Team Huddles.
- All clinic staff.
- No more than 5 minutes.
- Review key messages.
- Review operational information such as staff outages.
Patient Care Team Huddles

- 1-2 times per day
- Patient Care Team
- 10-15 minutes
- Review the patients on the schedule for that session
- Don’t throw out your good processes just because you are virtual
Don’t fall back into the email trap…
Everyone in the organization receives the same key messages in a timely manner.
# Sample Schedule for Communication

<table>
<thead>
<tr>
<th>Time</th>
<th>Monday</th>
<th>Tuesday</th>
<th>Wednesday</th>
<th>Thursday</th>
<th>Friday</th>
</tr>
</thead>
<tbody>
<tr>
<td>7:45 am-7:59 am</td>
<td>Leadership Huddle</td>
<td>Leadership Huddle</td>
<td>Leadership Huddle</td>
<td>Leadership Huddle</td>
<td>Leadership Huddle</td>
</tr>
<tr>
<td>8:00 am-8:05 am</td>
<td>Administrative Huddle</td>
<td>Administrative Huddle</td>
<td>Administrative Huddle</td>
<td>Administrative Huddle</td>
<td>Administrative Huddle</td>
</tr>
<tr>
<td>8:06 am-8:15 am</td>
<td>Patient Care Team Huddle</td>
<td>Patient Care Team Huddle</td>
<td>Patient Care Team Huddle</td>
<td>Patient Care Team Huddle</td>
<td>Patient Care Team Huddle</td>
</tr>
<tr>
<td>3:00 pm-5:00 pm</td>
<td>Leadership Meeting</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Today’s Takeaways

- Midway Knock
- Communicating with Staff
- Communicating with Patients
Dear Patients of [Insert Organization’s Name],

We hope you are doing well and feeling healthy. We are writing to let you know that as your primary care provider we are still here and are opening up our doors for increased access to care over the next couple of weeks. As always, our commitment is to you and our community. We are here to keep you healthy and safe.

Below we have included some information that could help you should you or any family need our services. We still encourage all of our patients to follow CDC guidelines when it comes to social distancing, hand-washing, and protecting vulnerable populations who are particularly prone to COVID-19.

1. We are OPEN for both in-person and telehealth visits. Our current hours are [Insert Hours] If necessary, include any changes to normal business hours here as a standout or if you are canceling preventative visits at this time. Any changes to our hours will be posted here [Insert link to updated hours].

2. We are following the current recommendations of the CDC and Michigan Department of Health and Human Services.

3. As always, the best way to reach us is by phone or email. Please don’t walk-in. You can reach us to make an appointment by calling [insert phone number]. Our phones are open from ____ a.m. to ____ p.m. Monday- Saturday.

4. Did you know that another way to reach us is through our Patient Portal? [insert link here]. You can get logged in by going here [insert instructions].

Here are a few screening questions we will ask you the day before your appointment:
Scripts for Patient Phone Calls

“Good Afternoon, [Insert Organization’s Name]. May I help you?”

If the Patient says they may need an appointment, “Great, I can help you with that. We wanted to let you know that we have been adjusting our workflows to make sure we are doing everything we can to keep the community safe at this stage in the COVID-19 response. I’ll explain more about those changes. First, let’s get you what you need. What would you like to see the provider for?”

If the patient wants to be seen but isn’t sure about telehealth or in-person, refer to the organization’s guide for good telehealth visit candidates. [Insert link here.]

Document reason for the visit and schedule the patient in their chosen slot for telehealth or in-person visit. “Great, we can get you scheduled for that. Does _______ (day), _____(date) and _____ (time) work ok for you?

“We wanted to let you know we are screening all of our patients before their appointment, is it ok if I ask you some questions?”
In-Office Visit: Explain the New Process

- Review the organization’s process for in-office visits with the patient.
  - What can they expect when they arrive?
  - What will they be asked to wear?
  - What does social distancing look like?
  - Will they be asked to wait in the car?
  - What happens if they have a fever?
How to Safely Wear and Take Off a Mask

WEAR YOUR MASK CORRECTLY
- Wash your hands before putting on your mask
- Put it over your nose and mouth and secure it under your chin
- Try to fit it snugly against the sides of your face
- Make sure you can breathe easily
- Do not place a mask on a child younger than 2

USE A MASK TO HELP PROTECT OTHERS
- Wear a mask over your nose and mouth to help prevent getting and spreading COVID-19
- Wear a mask in public settings when around people who don’t live in your household, especially when indoors and when it may be difficult for you to stay six feet apart from people who don’t live with you
- Don’t put the mask around your neck or up on your forehead
- Don’t touch the mask, and, if you do, wash your hands or use hand sanitizer

FOLLOW EVERYDAY HEALTH HABITS
- Stay at least 6 feet away from others
- Avoid contact with people who are sick
- Avoid crowds and places with poor ventilation
- Wash your hands often

TAKE OFF YOUR MASK CAREFULLY, WHEN YOU’RE HOME
- Untie the strings behind your head or stretch the ear loops
- Handle only by the ear loops or ties
- Fold outside corners together
- Place mask in the washing machine
- Wash your hands with soap and water

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Symptoms of Coronavirus (COVID-19)

Know the symptoms of COVID-19, which can include the following:

- Cough, shortness of breath or difficulty breathing
- Fever or chills
- Muscle or body aches
- Vomiting or diarrhea
- New loss of taste or smell

Symptoms can range from mild to severe illness, and appear 2–14 days after you are exposed to the virus that causes COVID-19.

Seek medical care immediately if someone has
Emergency Warning Signs of COVID-19

- Trouble breathing
- Persistent pain or pressure in the chest
- New confusion
- Inability to wake or stay awake
- Pale, gray, or blue-colored skin, lips, or nail beds, depending on skin tone

This list is not all possible symptoms. Please call your healthcare provider for any other symptoms that are severe or concerning to you.

cdc.gov/coronavirus
Síntomas del coronavirus (COVID-19)

Conozca los síntomas del COVID-19, que pueden incluir:

- Tos, falta de aire o dificultad para respirar
- Fiebre o escalofríos
- Dolor en el cuerpo o los músculos
- Vómito o diarrea
- Pérdida reciente del gusto o del olfato

Los síntomas pueden ser de leve a graves, y aparecer de 2 a 14 días después de la exposición al virus que causa el COVID-19.

Busque atención médica de inmediato si alguien tiene signos de advertencia de una emergencia del COVID-19:

- Dificultad para respirar
- Dolor o presión persistentes en el pecho
- Estado de confusión o aparición reciente
- No puede despertarse o permanecer despierta
- Color pálido, gris o azulado de la piel, los labios, o el lecho de las uñas, dependiendo del tono de piel

Esta lista no incluye todos los síntomas posibles. Llame a su proveedor de atención médica si tiene cualquier otro síntoma que sea grave o que le preocupe.


cdc.gov/coronavirus-es

cdc.gov/coronavirus

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APPENDIX A
COVID-19 Vaccine Communication and Confidence Checklist

Use this checklist to promote COVID-19 vaccine confidence among your healthcare personnel.

<table>
<thead>
<tr>
<th>Activity</th>
<th>CDC Resources</th>
</tr>
</thead>
</table>
| 1  □ Give COVID-19 vaccine communication and confidence basics presentation to healthcare personnel. | CDC Resources:  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (PowerPoint)  
  - How to Build Healthcare Personnel’s Confidence in COVID-19 Vaccines (Guide) |
| 2  □ Hold an initial discussion with 8-10 staff to identify strategies for making vaccine confidence visible. | CDC Resources:  
  - COVID-19 Vaccine Confidence Conversation Starter (Guide) |
| 3  □ Provide training and education                                      | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |
| 4  □ Post COVID-19 vaccine educational materials in staff break rooms and common areas in your health facility (posters, handouts, FAQs). | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |
| 5  □ Post COVID-19 vaccine information blogs and/or articles on your website, intranet, and social media platforms (blog posts, social media, videos). | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |
| 6  □ Create and publicize a feedback mechanism for staff members to ask questions or receive guidance about COVID-19 vaccination (email inbox, phone number, point of contact). | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |
| 7  □ Share regular staff updates on COVID-19 vaccination efforts (staff meetings, email blasts). | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |
| 8  □ Communicate where, when, and how healthcare personnel will be offered the vaccine. Share any plans to support personnel needing time away from clinical care if they are experiencing any expected post-vaccination side effects (posters and flyers in break rooms, staff meetings, email blasts). | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |
| 9  □ Have conversations with staff about the vaccines, and use strategies identified during staff discussions to make vaccine confidence visible in your facility. | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |
| 10 □ Share testimonials from healthcare personnel who volunteer to speak about why they got vaccinated and promote among staff, such as on the intranet or Internet, in staff meetings, and on social media (social media, blog posts). | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |
| 11 □ Recognize healthcare personnel who have been effective vaccine confidence boosters (staff meetings, email blasts, social media, blog posts). | CDC Resources:  
  - COVID-19 Vaccine Basics: What Healthcare Personnel Need to Know (Flyer)  
  - Building Confidence in COVID-19 Vaccines Among Your Patients: Tips for the Healthcare Team (Flyer)  
  - Quick Answers to Common Questions People May Ask about COVID-19 Vaccines: Tips for Healthcare Professionals (Flyer) |

www.cdc.gov/coronavirus/vaccines
How our facility is keeping patients safe from COVID-19

Our facility is prepared for the possible arrival of patients with coronavirus disease 2019 (COVID-19). We are committed to keeping patients safe and are taking the following steps to reduce the risk of COVID-19 in our patients and staff:

We are providing extra training for staff and education for patients about the importance of hand hygiene, face masks, respiratory hygiene and cough etiquette.

Tissues, alcohol-based hand sanitizer, and trashcans will be provided in the waiting area and treatment area. Soap and water will continue to be available at all hand-washing sinks and in the restrooms.

We are monitoring patients and families for symptoms of COVID-19.

Call ahead if you have fever, new cough, sore throat, shortness of breath. This allows us to connect you with appropriate care ahead of your arrival.

We are monitoring all staff for symptoms of COVID-19.

We are instructing staff who have symptoms of COVID-19 (e.g., fever, cough, sore throat, shortness of breath, muscle aches, tiredness) to stay home and not come to work.

We are continuing our routine cleaning and disinfection procedures as these procedures are recommended for protecting patients from COVID-19 in health centers.

Any surface, supplies, or equipment located within the patient area will continue to be disinfected or discarded between patients.

We are limiting staff and visitors coming into the facility.

We are limiting non-essential staff entry into the facility by exploring ways to provide care to patients remotely and allowing some staff to work remotely.

We are restricting visitor access to only those who are essential for the patient's care. Visitors will be screened for fever and symptoms of COVID-19 prior to entry. Visitors will be asked to wear their cloth face covering and limit their movement in the facility.

We are encouraging patients and staff to share all questions and concerns related to COVID-19.

Don't be afraid to use your voice. It is okay to ask staff questions about treatment changes and ways to protect yourself and your family.

For more information, visit our website [insert website].
Leveraging Community Partners

- List the organizations as community partners and resources on each other's websites
- Create joint Social Media posts
- Send a staff member, such as an MA, to outreach patients at the Community Partners’ location
- Create a list of Community Partners for staff to share with patients
Potential Community Partners

- Food banks
- Domestic Violence Shelters
- Homeless Shelters
- Unemployment Offices
- Senior Centers
- Meals on Wheels
- Schools
- Hospitals
- Etc.
Sample Email for Community Partners

Dear [Insert Organization Name],

My name is [insert name] and I work at [insert organization name]. As you know, the COVID-19 crisis has hurt individuals and families in our community. I was hoping that we could connect to talk about how we can work together to serve our community better. I would love to learn about the work you are doing, and I can share how our organization can help. [I attached a flyer about the services we can provide below.]

Thank you for your time,

[Insert name]
Today’s Takeaways

- Midway Knock
- Communicating with Staff
- Communicating with Patients
More Resources Are Available

COVID-19 Resources
Coleman Associates Innovation

Podcast Instructions

1. Wherever you Listen to Podcasts
2. Search “Coleman Associates Innovation”
Stay in Touch

- Find us at ColemanAssociates.com
- Email us at Notify@ColemanAssociates.org
- Listen to our Podcast: Coleman Associates Innovation Podcast
- Join our network on social media
  - Twitter: @ColemanAssoc
  - Facebook & LinkedIn: Coleman Associates – Patient Visit Redesign

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