Safety-Net Clinics Are Shifting the Paradigm With Help From KP

By Laura Saponara, Sr. Communications Consultant, National PR and Communications | October 15, 2014

Safety-net clinics are swamped with demand because they are committed to serving the most underserved and vulnerable. Through a special endowment, KP is helping these clinics transform the way they deliver primary care to achieve better, sustainable results.

A patient is in need of care. He picks up the phone. “Come on in and see your provider,” instructs a helpful, hurried voice. In no time, an appointment is set for four weeks down the line.

A convention of primary care is to connect patients with care as soon as care providers’ schedules permit. But there’s a good chance this model is not the most efficient or effective way to go.

“We use appointments to mark time, to define and track patients,” said Carolyn Shepherd, MD, former vice president of clinical services at Clinica Family Health Services in Colorado. “There are lots of inefficiencies and disincentives and the provider schedule gets filled up.”

More than 20 years ago, Kaiser Permanente began to change business as usual in primary care by listening closely to patient feedback, improving scheduling systems, and adopting a highly proactive approach to preventive care. And beyond the doors of our own hospitals and clinics, we are helping safety-net clinics to do the same — to identify, adapt, and evaluate best practices in primary care.

In 2004, Kaiser Permanente created a $4 million endowment — called the Institute for Healthcare Innovation Safety Net Endowment — to enable people who specialize in providing care for the underinsured and uninsured to “access world-class training and programs that support system transformation,” explained Rebecca Hambright, MPH, manager of KP’s Community Benefit Program.

This summer, scholarships from the endowment let 38 individuals who work at safety-net clinics on the West Coast attend a special program in San Francisco called Transforming the Primary Care Practice.

Focus on the patient

Transforming the Primary Care Practice enlists expert faculty to guide participants towards exceptional advanced primary care and the meaningful use of information technology.

The program attracts a wide array of participants from academic medical centers, the Veteran’s Administration, and private for-profit health systems, which are also looking to achieve significant results in quality, safety, and innovation.

Program participants discuss options for engaging patients to help design services and systems that better serve them. A patient who serves as an advisor to a local health care system sits on the faculty of Transforming the Primary Care Practice each year and is present throughout the meeting — listening, sharing stories, thoughts and feelings, and offering feedback.

Transforming the Primary Care Practice is one of many active learning programs designed and run by the Institute for Health Improvement, a longtime strategic partner of Kaiser Permanente and an organization known for its success in spreading best practices.

Continuity is key

The curriculum of Transforming the Primary Care Practice places a central focus on optimal
continuity — and strong, positive relationships — between patients and their preferred provider. Attendees learn that a reliable empanelment process, in which individual patients are assigned to a preferred care provider and care team, is the on-ramp to continuity.

“It was challenging from an information technology standpoint,” said Meghan Powers, quality improvement manager at the Venice Family Clinic in West Los Angeles, which serves approximately 24,000 uninsured, low-income, and homeless patients at 10 clinic sites.

After returning from Transforming the Primary Care Practice, Powers and her team made a push to empanel all patients. She is confident that evaluating the size of each provider’s panel will help with scheduling and make it easier to manage the flow of patients. Powers and her colleagues are also planning to pilot group visits, buoyed by the experiences of others and by research shared at Transforming the Primary Care Practice.

“We are taking a look at our support staff ratios and arriving at new and clearer definitions of roles, with the goal of strengthening support for clinicians,” explained Tracy Mendez, director of medical operations at La Clinica de la Raza, which operates health centers and dental sites throughout Northern California’s East Bay area.

In team-based care, physicians often play the leading role in setting protocols that guide the delivery of care and medicine, but many at Transforming the Primary Care Practice have found that it’s important for physicians to then “get out of the way,” so staff can then carry out those protocols.

For example, at Clinica Family Health Services, an algorithm guides staff to ask the right questions to ensure that patients stay on track to prevent and manage chronic disease.

Metrics

Participants of Transforming the Primary Care Practice learn about the importance of gathering and analyzing data on “third next available” appointments, panel sizes, continuity, demand and supply forecasting, patient and staff satisfaction, and no-show rates.

Since 2005, more than 2,200 leaders and front-line practitioners have been able to attend learning and dialogue programs such as Transforming the Primary Care Practice through the KP-funded endowment.

“These are people with extraordinary motivation to adopt tools that show tremendous promise for both patients and staff,” said Winston Wong, MD, director of Disparities Improvement and Quality Initiatives, Community Benefit. “It’s an honor to support their efforts to continually improve primary care for the communities that are most in need.”

“We have a path laid out for us as a patient-centered medical home, but Transforming the Primary Care Practice put a lot of that in better context,” said Powers of the Venice Family Clinic. “It gave us a picture of what the path looks like.”