Schools Open, Visits Down: A Look at Increasing Visits Post COVID-19

Karen Espinoza and Bryan Rodriguez
About Us!
An innovative health care system that is a model for success in the nation.

**OUR VALUES**

**Excellence**
We are better every day.

**Compassion**
We care for everyone.

**Relentlessness**
We fight for everyone.

**Stewardship**
We use resources responsibly.

**Learning**
We educate the next generation.

**FAMILY HEALTH CENTERS**
Offering total care in 9 neighborhood centers where communities need it the most. 580,000+ patient visits completed annually.

**DENVER HEALTH MEDICAL CENTER**
One of Colorado’s busiest hospitals with 24,000+ inpatient admissions annually, ranked in the top 5% for inpatient survival.

**ERNEST E. MOORE SHOCK TRAUMA CENTER**
Region’s top Level I Trauma Center for adults and Level II Center for children with a 98% survival rate.

**SCHOOL-BASED HEALTH CENTERS**
Keeping kids healthy in school by providing health care to DPS students through 18 in-school clinics, free of charge.

**ROCKY MOUNTAIN CENTER FOR MEDICAL RESPONSE TO TERRORISM**
Working every day to plan for the “what if” for 5 states.

**DENVER HEALTH FOUNDATION**
Accelerating Denver Health’s mission by providing resources for important projects and programs.

**EMERGENCY RESPONSE**
Operating Denver’s emergency medical response system in the state – handling 110,000+ emergency calls and logging 1 million miles on our emergency vehicles each year.

**ROCKY MOUNTAIN POISON AND DRUG SAFETY**
Trusted experts for multiple states and over 100 national and international brands.

**DENVER HEALTH MEDICAL PLAN, INC.**
Keeping our community healthy by providing health care insurance to 90,000+.

**DENVER CARES**
Providing a safe haven and detox for the public.

**CORRECTIONAL CARE**
Providing medical care to prisoners in Denver’s jails and via telemedicine.

**NURSELINE**
Registered nurses field 180,000+ calls per year – advising on medical information, home treatment, and when to seek additional care – giving patients peace of mind 24/7.
Denver Health

SCHOOL-BASED HEALTH CENTERS

- 19 brick-and-mortar SBHCs within Denver Public Schools.
- Started in 1987: provide primary care, behavioral health, reproductive health education, dental care, STEP therapy & insurance enrollment.
- 12,000 students use an SBHC annually; a team of more than 90 staff.
- We serve students from Early Headstart thru High School.

SBHC Telehealth:
- Telephone and tele video options.
- Medical, Mental Health & Psychiatry
- *New* Tele dental services.

DPS Telehealth:
- Additional 30 schools, without SBHC.
Learning Objectives

• By the end of this workshop participants will be able to:

1. Describe 1-3 actions to increase users and visits within their own SBHC.

2. Describe 2-3 innovative ideas to increase access and patient reach.

3. Identify barriers that impact productivity and tools to address productivity concerns.
A Look at Increasing Visits Post COVID-19
“The oak fought the wind and was broken, the willow bent when it must and survived.”

— Robert Jordan, The Fires of Heaven
Navigating the Challenge of Electronic School Registrations

Due to the pandemic, Denver Public Schools changed their in-person registration events to an electronic registration format which created a unique obstacle for our SBHC department in collecting consents.

- Electronic Consents
- Verbal Consents
• **DOCUSIGN** is the software our department has utilized to collect electronic consents over the past three years.

• The E-Consent has been included at most school online registrations.

• For SY 22-23, 41% of consents collected were E-Consents.

**SY 22-23**
E-Consents Processed
5,000+
## Denver Health and Hospitals Authority Inc - SBHC's environmental savings

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This compares to:
- Removing 5 cars from the road
- Skipping 88 loads of laundry
- Conserving 83 trees
- Saving 366,831 pages of paper
Verbal Consents

**Verbal consent** is offered in instances where the parent does not have any other option to complete the consent form.

Our staff help the parent by completing the e-consent over the phone and have the patient provide verbal consent.
Implementation of Virtual Care

- Telemedicine options for faster visits.
- School Nurse initiated visits for our non brick and mortar sites.

Frequent complaints include headache, menstrual cramps, conjunctivitis, allergies, etc.
Denver Health Virtual Care Program

Aims to ameliorate inequity in accessing healthcare and improve access to education.

- New service allows DPS nurses to virtually connect to SBHC services, right from their school.
- Expanded care to an additional 8,000 DPS students.
- Provide peripherals, medications & trainings.
- Minimizes out of class time for students.
- Currently have 32 virtual sites and will be adding 10 more this coming school year.

Medical: [Drive Link]
Dental: [Drive Link]
Virtual Care for All Services!

**Medical** virtual care beyond our brick-and-mortar sites

**Dental** In-person visits with a dental Hygienists and virtual exams (synchronous and asynchronous) with a Dentist.

**Mental Health** In-person and virtual visits.

**Enrollment** applications are processed virtually and quick response turnaround.

**Psychiatry** In-person and virtual visits as well as Integrated psychiatry for medical provider consults.

**Health Education** will be joining the virtual party soon..... 😃
Re-establishing trust!
Newsletters for patents and TikTok for the kids!

https://www.tiktok.com/t/ZT8Jqd8dx/

https://www.tiktok.com/t/ZT8Jqes5F/
Meeting community needs!

- Mass Vaccine Clinics
- Outreach Events
- Insurance Enrollment to SBHC Families and community
- Helping Families as a Whole
COVID-19 Vaccine Clinics

Administered **15,418** vaccines to **8,874** individuals
MOU UPDATES

Denver Health School Based admin team updated the Memorandum of Understanding (MOU) to expand services to see any sibling of a DPS student regardless if they are not enrolled into Denver Public Schools. This expansion has increased volume throughout our 19 clinics.

**REQUIREMENTS:**
- Have a sibling enrolled in Denver Public Schools
- Be between ages 3-21

**SPECIAL CASES:**
- Siblings between 0-2 must be seen at specific SBHC sites
- Siblings ages 21-25 must have prior approval from APP Managers
OUTREACH STRATEGIES

- SCHOOL & COMMUNITY EVENTS
- SOCIAL MEDIA
- COMMUNITY ENROLLMENT OUTREACH
- SCHOOL ATTENDANCE LINE
- CLASSROOM PRESENTATIONS
- MEDIA INTERVIEWS
SCHOOL & COMMUNITY EVENTS

School Events - Back To School Night, Parent-Teacher Conferences, Resource Fairs, Career Day, Family Night, Fall Festival, Winter Festival, Etc

Community Events - N.A.C.E. (Native American Culture & Education) Events, Health Workshops, Comprehensive Human Sexuality Education Workshop, Community Market, Community Celebration & Resource Fair, Community Hubs, Etc.
SOCIAL MEDIA

Facebook
Tik-Tok
Instagram

Post 1-3 times a week

Tik-Tok views range between 300-2000 views on each video

What is a Denver Health School-based Health Center? - YouTube
CLASSROOM PRESENTATIONS

- General Health Topics
- Sexual Health Topics
- Career Day
Several schools have included a pre-recorded message on their attendance line that provides parents with the information of their School Based Clinic.

• This strategy has helped increase volume at the schools that have implemented this.
COMMUNITY ENROLLMENT OUTREACH

Our SBHC Enrollment Team assists both uninsured SBHC patients and community clients with applying for Medicaid, CHIP, and/or Discount Programs.

• Our community clients normally have children enrolled in our district but are unaware of our SBHC services.

• When their application is processed, we provide them with information of our School Based Clinics. (Consents, Flyers, etc.) We processed a total of 1,581 DPS students (non-SBHC users) and provided their parents with information about our clinics. This has led to an increase in our volumes.
Participating in media interviews are an important strategy to get known in the community.

- Radio Shows
- Podcasts
- News
Moving past the fear and tapping into our why!!!!
Accountability

ADMIN
*Weekly review of all teams with all managers.
*Monthly Site Visits or 1:1 rounding with staff

CLINIC
*Monthly involvement surveys
*Weekly huddles with clinic teams

PROVIDER/SUPPORT
*Daily huddles to discuss patient care or clinic flow.

Moving past the fear and tapping into our why
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Patient Care Team Meetings

**PURPOSE**

To establish a standard communication process for clinic care teams to engage in pre-visit planning for activities that ensure optimal patient care.

**SCOPE**

A. Medical Assistants
B. Providers

**DEFINITIONS**

None

**PROCESS**

Medical Assistants and Providers will utilize Epic tools (e.g., best practice advisories, care gaps / health maintenance, incomplete orders) to identify patient care gaps (e.g., screenings due, immunizations due). Epic has been configured to ensure that patient care gaps are visible and actionable by Medical Assistants and Providers.

Medical Assistants and Providers are responsible for establishing processes to ensure that patient care gaps are addressed. Medical Assistants and Providers are expected to maximize use of Epic’s integrated communication tools such as secure chat, schedule notes, and other forms of structured communication. Medical Assistants and Providers may prefer to huddle face-to-face prior to the clinic sessions to review patient care gaps and create a plan for addressing those care gaps during the visit. Medical Assistants and Providers who regularly work together and have established routine processes to address patient care gaps might only need to engage in structured communication or huddles when established routine processes are not possible. Medical Assistants and Providers who do not regularly work together (e.g., float MA, temporary assignments) are encouraged to use Attachment A as a guideline for huddling.

**DURING MINI-HUDDLE**

**Medical Assistants**

- Review and/or print your provider’s schedule for the day.
- Review the following gaps of care for each patient scheduled:
  - Not completed and future labs
  - Not completed and future Diagnostic Imaging orders
  - Not completed referrals
  - BPAs/Care Gap Score/Health Maintenance Screenings
    - Opportunistic exams (e.g. PAPs, FOBT)
    - Needed immunizations
    - Screenings due (e.g. PHQ-4)
  - Anticipated supplies and consents for visit (e.g. procedures)
  - Anticipated resources (e.g. Interpretation, BH, Patient Navigator)
- Document findings in printed schedule

**Provider**

- Review Epic and/or printed schedule with MA notes.
- Decide which care items need to be completed today, and which ones might need to be rescheduled or taken care in a future time.
- Decide if there might be visits that need to be rescheduled (e.g. orders not completed for a full assessment today)
- Look for opportunities for double booking walk-in patients

**AFTER MINI-HUDDLE**

**Medical Assistants**

- Follow up with Front Office for double booking information and hand any forms that they can hand to patient at check in.
- Follow up with resources (e.g. Interpreter, BH Provider, Patient Navigator, etc.) to alert them that they might be called for a visit.
SBHC Communication and Request Form

Type of Communication or Request

Click the option that aligns with your request: *

- Involvement Survey
- Equipment Request

Since the beginning of the month, in what ways has your team connected with the school/community? (Introductions required minimum one time each semester or any time there are staffing changes in the clinic.)

- Spoke with Principal/Assistant Principal
- Introduced clinic staff/self
- Presented in a meeting or classroom
- N/A
- Other

For the question above, what topics were discussed between SBHC staff and school/community partners including any specific challenges and/or successes?

Your answer

Does your team have any asks or requests of Admin this month? If so, please list below:

Your answer

Please share a success story from your clinic:

Your answer

Please list dates and titles of any trainings/webinars/conferences or any professional development opportunities that you or other members of your team have participated in to ensure continued learning and growth in relevant topics related to SBHC:

Your answer
THE VMB!!!
What’s Next?

- Break out into groups with people from different organizations.
- Pick 4 core components that your admin team would like you to track.
- Pick 2 elective components that your clinic team would like to keep track of.
- Share your Visual Management Board (VMB).
Follow us!

Thank you !!!