

## HEALTH TECH MANAGEMENT

# Providing Solutions Through Technology

By Charleta B. Tavares, CEO

PrimaryOne Health's board and staff have undergone a strategic planning process to design and transform how we provide and expand services, grow patients, increase quality measures, improve health outcomes for our patients and diversify revenue. Our team has looked at these strategies and how we can achieve them efficiently, effectively and at the highest level. With this in mind, we are embracing how technology can assist us in meeting and surpassing our board's goals of *Service, Growth, Choice and Strength*.

Our Patient Advisory Committee and Chief Community Services Officer are reviewing technology platforms to assist us in gathering patient satisfaction on services, staff and facilities. The committee is working with our IT director to identify the appropriate application and equipment to gather real-time data for each of our service lines, health center sites and staff in order to improve our patient experiences, identify areas of weakness and support and replicate models of excellence.

The Chief Clinical Officer, practitioners, behavioral health and other clinical teams are reviewing applications and platforms for electronic health records, population health and quality measurements. The teams are looking at software to gather information on the Social Determinants of Health (SDOH) while complementing behavioral health and other risk-assessments tools such as SBIRT to provide holistic care for our patients.

The Chief Financial Officer, billing, accounting, IT and HR teams are working on new technologies to streamline and reduce processes for accounting and increasing staff development and compliance trainings. They are initiating the substitution of credit cards and multiple invoicing processes for purchasing cards or P-Cards for managers, directors and officers. They are also looking at telehealth and our electronic health record platforms to expand health care and provide continuity of care with hospitals, other practitioners and health services.

Finally, our Chief Operations Officer, Patient Navigation Services, Patient Support Specialists, Site Managers, Referral Specialists, Facility and IT teams are looking at ways to increase patient use of technology and new uses of technology to streamline processes, reduce redundancy, share health information and educational tools and to connect patients to the right services, at the right place and right time to improve their health outcomes.

## IN MEMORIAM



Mr. Jackie Green



Dr. Lucille  
Doak-McCauley



Jasmine Handon

PrimaryOne Health has lost several members of our family over the last several months, Mr. Jackie Green, board member, Dr. Lucille Doak-McCauley, Optometrist and Jasmine Handon, Healthcare for the Homeless Case Worker. We mourn their loss and lift up their remarkable, steadfast and impactful work with our organization and their dedication to their team members, community and family. Each of these members of our family will be sorely missed by our patients who benefited from their devotion to our mission and enthusiasm in serving those who are vulnerable and often forgotten. We will continue to seek ways to carry on their legacy and smile when their names are mentioned or stories are shared about their service.

## ADVOCACY RECOGNIZED

PrimaryOne Health was recently recognized by the Ohio Association of Community Health Centers (OACHC) as the Outstanding Advocacy Award Winner at their Spring Conference held in Columbus. The organization bested 51 Community Health Centers and Look-Alikes to win the advocacy award for their work with Congress to address the Funding Cliff fix. PrimaryOne Health's board, staff and patients were ardent in making phone

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# Community Services Teams Addressing Social Determinants of Health with an App



The Community Services Outreach Team and the Healthcare for the Homeless team, took part in a training on the use of an app, **Healthify**® that helps identify community resources for patients. The **Healthify** app helps healthcare organizations find community services, track social needs, and coordinate referrals with community partners to radically improve the health of PrimaryOne Health patients and community members.

**Healthify** will allow us to track and understand what the needs are in a population and to report on what referrals are being made. With the ability to track,

our teams can follow-up on referrals made for individuals and deploy integrating screening tools to assess for social needs. This allows our teams to fully understand the social determinants in a population and, match people to the best services. Why is it important to track? Because having the ability to track patient referrals and ensure whether or not they have been successfully completed is the essential first step in the care coordination process.

In our ongoing effort to address the Social Determinants of Health (SDOH), we know that over 60% of our health is

determined by social needs like access to food, employment, housing and childcare. Many healthcare organizations are beginning to take note of the correlation between SDOH and patient outcomes. This implies that there is more to health than healthcare, thus, there is a need for many of our healthcare organizations to rethink how we can better work with communities to help people live healthy and productive lives. Once this app and training is fully implemented, look for updates on how we determine the use and benefits of this new app.

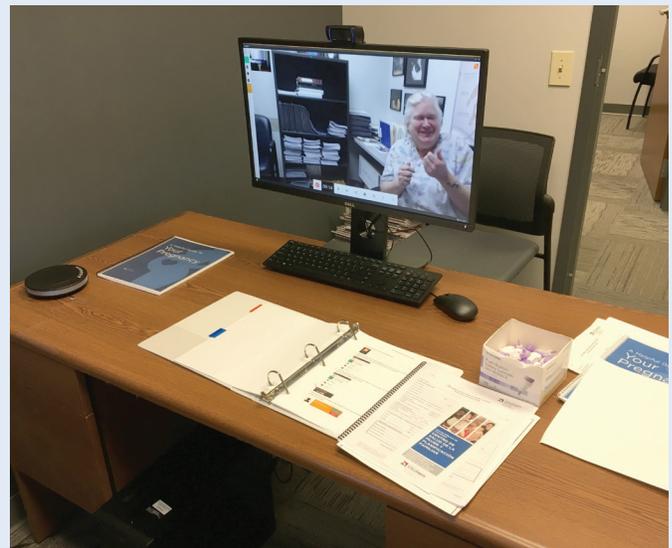
## WHEN THE PRACTITIONER COMES TO YOU

“The nurse will see you now”, for many of our expectant mothers, meant that they had been sitting in the Health Center lobby, awaiting their turn to see their provider, in person. It now means, that the expectant mother will have her lab work conducted and will be escorted to a space in which she will call up her Nurse Practitioner on a computer. Although face-to-face, but not person to person.

PrimaryOne Health is currently piloting telemedicine services at our Agler Road Health Center. Over the last three months we have tested providing this service with our Obstetric (OB) intake visits. With a recent increase of patients in need of obstetrics, OB Nurse, Kim Salzwedel has been able to see Agler patients from her office at our East Main Health Center. This has allowed us to keep up with the increase of OB intake visits at Agler and not have patients travel to a site that may not be located close to them.

While this is a long way from where we would like to be in providing telemedicine services, this is a great start that we can learn from as we move forward with selecting technologies and workflows that will improve our delivery of quality healthcare.

Over the next year PrimaryOne Health’s Leadership will analyze and come up with a long term plan to implement telemedicine services to ultimately improve the delivery of care to our patients.



### What is TELEMEDICINE?

It is the use of telecommunication and information technology to provide clinical healthcare from a distance. It has been used to overcome distance and transportation barriers and improves access to medical services.

# 2018 Ohio Medicaid Managed Care Organizations (MCOs) Days



Following the success of our 'Buckeye Day' held at our W. Broad Street location in November 2017, where we partnered with Buckeye Health Plan to provide well visits to members past due for services, we have embarked on several more partnerships with the Ohio Medicaid Managed Care Organizations (MCOs) to host similar events thorough 2018. Several providers and support staff have already volunteered for these events, and additional opportunities will be available.

The events are planned bi-monthly, starting in February 2018. Each event has a focus



on various service needs, gaps in care, or for those that are without an established medical home. This also coincides with Healthcare Effectiveness Data and Information Set (HEDIS), Comprehensive Primary Care (CPC) Initiatives and our own internal Quality Improvement measures.

Our first event was held at our E. Main Street location on February 17th, where we partnered with Molina Healthcare to invite our mutual members/patients to "Show your heart some love this February" and targeted members in need of a well visit, cervical cancer screening, or uncontrolled

hypertension. Drs. Barbara Laroque and David Tessier offered primary care visits, while Dr. Jeffery Marable performed cervical cancer screenings and other women's health services.

The next event is planned for April 14th, at our W. Broad Street Health Center, and will include all five of the Ohio Medicaid MCOs, with a spotlight on diabetic health. Our outreach efforts will ask diabetic members to "Step into spring with good health"—We will offer primary care visits that encompass diabetic foot exams, Hemoglobin A1c testing and nephropathy testing (diabetic kidney function). We will also enlist our vision services to perform diabetic eye exams. All five of the Medicaid MCOs will participate and have representation in various capacities, including some plan to provide gift cards to members who complete specific services, information tables, and giveaways. PrimaryOne Health will provide healthy snacks to those in attendance, and also a chance to spin a prize wheel for various PrimaryOne Health promotional items, among some other activities.

Future events are as follows:

## Play It Safe

June 16th with *Paramount*  
1905 Parsons Ave. Health Center

- Well-Visits & Physicals
- Dawg Pound Rewards for patients who complete well visit

## Back to School

August 18th with *CareSource*  
2300 W. Broad St. Health Center

- Child Well-Visits and Immunizations

## Fall into Good Health

October 13th with *Buckeye Health Plan*  
3433 Agler Rd. Health Center

- Well-Visits & Flu Vaccines

## Tis the Season

December 8th with *UnitedHealthcare*  
1180 E. Main St. Health Center

- Diabetes, Well-Visits & Flu Vaccines

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calls and sending emails, texts, Facebook and Twitter messages to their members of Congress to share with them the impact of Community Health Centers and specifically, PrimaryOne Health in addressing the health care needs of their constituents. They focused their message on the cost/benefit of Community Health Centers, their work in addressing the Opioid and Infant Mortality crises and their work to improve patient outcomes.

Dewitt Harrell, Chief Financial Officer and Charleta B. Tavares, CEO later attended the National Association of Community Health Centers' (NACHC) Policy and Issues Conference in Washington, DC to share their appreciation with Senators Sherrod Brown and Rob Portman and Congress members Joyce Beatty and Steve Stivers, as well as to advocate for long-term funding,

Medicaid policy trends, and health centers' groundbreaking work to integrate primary care services with behavioral health and substance abuse treatment.

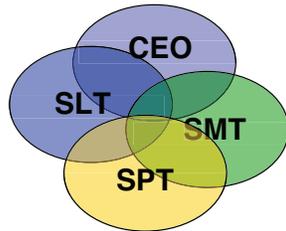


*Dewitt Harrell, CFO, PrimaryOne Health, Julie DiRossi-King COO, Theresa Rios-Bishop, Outreach and Policy Manager both of Ohio Association of Community Health Centers, Yolanda Owens, Communications Coordinator and Deani Deskins-Knebel, Director of Dentistry, both of PrimaryOne Health.*

# PrimaryOne Leadership Structure

Early in 2018, the organization undertook business transformation strategies to fine tune and create efficiencies in our business functions. The business transformation efforts also included reviews of patient needs, products, services, business processes, management and organization structure, information technology requirements, data and information systems, and infrastructure. Through this business transformation, these different organizational elements will become more aligned, resulting in **increases in organizational agility, efficiency and effectiveness.**

**PrimaryOne Health (PIH) Leadership Structure**



One key business transformation was the realignment of the leadership level structure and teams pictured to the ABOVE. The new leadership structure and teams are as follows:

- Chief Executive Officer – CEO
- Senior Leadership Team – SLT
- Strategic Planning Team – SPT
- Senior Management Team – SMT

**Chief Executive Officer (CEO)** – Describes the desired culture, vision, values and strategy. Holds the organization accountable and ensures transparency. Builds internal and external relationships. Has a creative edge and promotes innovation. Leads with questions. Consciously models the way, the mindset, the behaviors, and the processes. Promotes a common vision, fosters collaboration and builds spirited teams.

**Senior Leadership Team (SLT)** – Comprised of all direct reports of the Chief Executive Officer (CEO). Takes responsibility for vision, alignment and deployment. Creates a culture of empowerment and teamwork. Builds trust, respect and commitment.

**Strategic Planning Team (SPT)** – Develops strategic plan themes, issues and content. Conducts and coordinates planning process. Provides input, insights and direction. Conducts interviews, environmental scan, and surveys. Develops goals, objectives, and strategies. Develops performance measures. Visionary. Thinks strategically.

**Senior Management Team (SMT)** – Makes decisions that guide organizational operations. All team members hold leadership positions in the organization. Members work together outside the team setting. Members are more effective individually by sharing information with one another. Members assist work groups with project coordination, prioritization, resolution of conflicts, communication, etc. Is responsible for managing and executing PIH tactics. The goals of the SMT:

- Create efficient operational coordination
- Establish, adhere to timelines
- Determining method for resolving competing priorities
- Stronger tactical integration
- Reduce silo effect
- Efficient communication protocol for reporting results
- Managing the “flow” of projects
- Working smarter, not harder

**We hope to be able to share PrimaryOne Health’s progress and growth through these new organizational leadership structures to better serve the community.**

**SAVE THE DATE**  
**Annual Meeting on May 14, 2018**



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This health center is a Health Center Program grantee under 42 U.S.C. 254b, and a deemed Public Health Service employee under 42 U.S.C. 233(g)-(n).

**Corporate Office**  
2780 Airport Drive, Suite 100  
Columbus, Ohio 43219  
p: 614.645.5500  
f: 614.645.5517  
[www.primaryonehealth.org](http://www.primaryonehealth.org)