

**Orcas Island Health Care District  
Proposed Alternative Approach to After Hours & Acute Care  
Summary of August 24<sup>th</sup> Meeting with UW Management**

Proposal:

- 1. Adopt the no cost option above, shifting existing hours to extend some days/limited weekend hours. No new FTEs required.**

**Discussion:** UW clarified that this model would work with their employees and that it included shifting hours so that the clinic would open later on set days in order to stay open later. It could also include closing Friday afternoons to be open ½ day on Saturday.

**Next Steps:** UW will evaluate and quantify the cost of adding ½ Saturday without a shift in hours during the week. **Next Step Lead: ?**

- 2. Agree to the no call sharing model.**

**Discussion:** Clarified that this was no call sharing between clinics.

**Next Steps:** None.

- 3. Retain existing model with nurse triage forwarded to on call provider if deemed medically appropriate.**

**Discussion:** The need for possible training was identified to address nuances of island living (i.e. not referring patients to an emergency room when ferries are not running in the middle of the night).

**Next Steps:** Review calls to date to quantify # of referrals that did not coincide with available services (i.e. ferries). **Next Step Lead:** Darren will distribute historical call data to District.

- 4. Confirm with UW that they are willing to allow their providers to come in after hours/weekends if they deem it medically necessary. If so, offer an incentive/compensation for each visit that a doctor does see a patient after hours/weekends. For discussion purposes at \$250 per visit, \$50K would cover 200 visits per year. Implement same agreement with OFHC.**

**Discussion:** UW confirmed that they are willing to allow their providers to come in after hours/weekends to see patients. UW Management would like to review proposal with staff versus having district present directly to UW provider staff.

**Next Steps:** 1) District will define the proposed after hours on site visit incentive structure and submit to UW leadership for review with UW provider staff. 2) After UW has had an opportunity to review with staff, the District would like an opportunity to talk directly with staff to make sure there is a collective understanding of agreement. UW management is welcome to participate in those discussions. 3) UW will clarify any requirements for triage prior to allowing their providers to see a patient in person after hours. **Next Step Lead:** District: Art Lange UW: Pete McGough/Mike Alperin?

Friday, August 31, 2018

Patty Miller

- 5. Work with UW to develop a process that would allow people who have not yet registered with UW to register during the acute/after hours process. In conjunction with this, consider encouraging community members to register with UW (OFHC does not require this step) proactively to help facilitate a smoother process if they want acute/after-hours care at the UW clinic.**

**Discussion:** District explained that there is still confusion regarding the after hours call process for individuals who have not yet registered with UW clinics.

**Next Steps:** UW will clarify in writing their current after hours on call procedure including the level of registration required to allow patients to have access to all aspects of after-hours care, including access to an on-call provider (versus being referred to EMS/Emergency Room/Other Primary Care provider). Clarification will include any next day follow up process followed by the clinic in response to previous day/night calls. UW will review with their risk management group to determine if there are any issues with allowing individuals in need of after-hours acute care to register over the phone during the acute care call. If we proceed with after hours on call coupled with on-site provider access (when deemed medically necessary), we will need to identify a process for Lopez on call providers to reach an Orcas provider when an in-person visit is recommended. **Next Step Lead:** UW Darren Layman

- 6. Work with UW to clarify the skill set necessary to support acute care issues on island to minimize the need for patients to travel off island for non-critical procedures. This would allow us to better understand why/when patients are being referred to EMS and off-island (i.e. is it a capacity issue or a skill set issue).**

**Discussion:** Dr. McGough explained that board certified family practices have the broadest set of skills however Advanced Practitioners (PA/NP), which are becoming more broadly used, training is less broad. Brief discussion on the need to ensure ongoing training is in place so that providers feel comfortable performing infrequent procedures.

**Next Steps:** UW will provide the District their "privilege sheet". District will work on needed skills/procedures. **Next Step Lead:** UW: Pete McGough, District: Pegi Groundwater, Diane Boteler

- 7. Agree to track and categorize all acute/after-hours calls. Keep track of when the call came in, nature of issue, how handled.**

**Discussion:** Agreement on this point.

**Next Steps:** Darren will distribute existing data on clinic acute/after-hours calls to date before the Tuesday August 28<sup>th</sup> meeting. Once district has an opportunity to review we can respond with questions or suggestions to content or format of data. **Update 8/31:** Data through July 2018 received. Darren is researching several questions regarding the data and will respond by 9/6. **Next Step Lead:** UW: Darren Layman, District: Richard Fralick, Patty Miller.

Friday, August 31, 2018

Patty Miller

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**8. Send all patients a customer survey to measure the satisfaction with the service.**

**Discussion:** UW stated that did not feel that sending a survey to a subset of patients on a specific topic would be relevant.

**Next Steps:** Clarify if patients who call nurse triage line are sent a survey, including those who are not UW registered before the call and get referred to their non-UW primary care provider. District would like to revisit including this step as it deems the information valuable. Additional next steps will be evaluated once existing dashboard data is better understood. **Next Step Lead:** UW Debra Gussein, District: TBD

**9. Confirm with UW that they are willing to collaborate with EMS, via direct access to their on-call provider, to arrange appropriate care for patients after hours.**

**Discussion:** This item was added to the original list. UW/EMS/Dr. Sullivan are working to schedule a meeting in early October to begin discussion on how they can best collaborate.

**Next Steps:** Meeting has been scheduled on October 1<sup>st</sup> with EMS/UW/Dr. Sullivan. Superintendent Presson has been invited to participate in meeting. **Next Step Lead:** UW: Pete McGough, District: Anne Presson, Diane Boteler

**10. Agree to monthly reviews of cases, likely in conjunction with EMS to evaluate how/if needs are being met.**

**Discussion:** General agreement on this item.

**Next Steps:** Discuss in conjunction with #9 above including ensuring PHD representation in the reviews.

**11. Set a goal for implementation at 10/1/18. Include in OMF contract with UW and new OIHCD contract effective 1/1/19. Trial period to run through 6/30/19. At the end of the trial we can evaluate success of program based on actual data which would include additional insights into:**

- a. Days/times of acute care needs
- b. Nature of treatment needed/skills required
- c. Volume of calls
- d. Customer satisfaction with process
- e. History of collaborative troubleshooting with EMS and OFHC

**Discussion:** Dr. McGough expressed a concern about trying to establish a timeline for implementation. Commissioner Miller expressed a need to agree to a “sense of urgency” regarding an implementation due to budgetary deadlines of November 2018 and the need to determine how/what to include in long term contract.

**Next Steps:** Work collaboratively to identify timeline for rapid implementation. **Next Step Leads:** All

Friday, August 31, 2018

Patty Miller

**Summary:** A face to face meeting with the entire board and UW management was beneficial to facilitate dialogue. There remain significant differences between any model acceptable to the district and what UW is currently willing to commit to. All parties will begin work immediately on the Next Steps to move the issues toward final resolution as quickly as possible.

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Friday, August 31, 2018

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