NNPH/CCHS Clinical Operations Assessment

330Partners

October 2023 – January 2024

Process

- Virtual interviews with Program Managers and other NNPH and CCHS Leadership(some interviewed several times)

- Employee Survey

- Focus groups during onsite review

- Community Stakeholder interviews

- Onsite review in December at NNPH/CCHS locations

- Data review and request

- Document review

- Strategic Planning documents review

- Follow up emails and virtual meetings after onsite review

STRONG PROGRAM ATTRIBUTES

Process

- National Accreditation through Public Health Accreditation Board

- Positive overall performance areas:
  - Quality and Safety
  - 340B Pharmacy Program Integrity
  - Data/Grants Management

- Robust employee recognition program

- National interpreter certification program

- Cross training staff to work in multiple programs

- Staff were open and engaging and committed to NNPH CCHS programs

Employee Survey

62 employees completed the online survey (administered in Nov 23)

- 54% response rate

- All employees, full-time and per diem staff – 114 employees - were invited to participate

Why staff like working at NNPH:
- Work is rewarding
- Love the mission and my programs/services
- Flexible schedules/hours
- Benefits
- Co-workers

Why staff would leave NNPH:
- Favoritism/lack of fairness
- Too much criticism/lack of support
- Lack of professional opportunities
- Conflict with supervisors/management
- Job is too difficult, stressful, or demanding

What could NNPH do differently?
- Increased wages
- Reducing staff vacancy rates and turnover
- Increasing opportunities for advancement
- Addressing the morale of the workforce
- Improving communication between program sites

Focus Group

A focus group was held at the 9ᵗʰ Street location with 21 CCHS program staff across the division participating

Communication:

● When you started working at NNPH, how did you find out about the services and programs offered by the CCHS division?
● Provide an example of when you received excellent communication at NNPH.
● If you could change one thing about communication at NNPH, what would it be?

Culture:

● One word to describe the culture at NNPH.
● What are the key values that NNPH needs to compete and thrive?

Feedback solicited from various external stakeholders:

- Focus on **screening patients** that present for services and **connect to care** at one of the many healthcare providers in the Reno/Sparks service area that serve uninsured and underinsured patients.
- Provide **care coordination**
- Continue TB screening, prevention, and treatment
- Focus on **health education and outreach** for all areas – communicable disease, STI, childhood immunizations, etc.
- **Be a convener**:
  - Assist in **finding gaps in services** that are needed by residents and focus efforts on **collaborating with others** to fill those needs.
  - Assist in **planning for next pandemic** and focus on emergency response efforts to ensure capacity for the future.
- **Reduce barriers to collaboration** with external partners

*of note – many external stakeholders were not aware of the name change to NNPH nor were they aware of the clinical services provided by NNPH/CCHS Division

Observations

- Assessment observations included what is currently happening at CCHS sites
- Consultants had ONE day at each site to observe current workflows
- Some sites/programs had no in-person patients for the entire assessment day
- Organized by program/service:
  - **Clinic Management**
  - **Clinical Care Model and Delivery**
  - **Physical Space Layout**
  - **Documentation Systems/Electronic Health Record**
  - **Finance and Revenue**
  - **Providers and Staffing**
  - **Quality and Compliance**
  - **Risk/Liability, where applicable**

Overall observations

- Communication
- Culture
- Human Resources
- Finance & Data
- Quality & Risk Management
- Each Program & Service Line

Overall Recommendations . .

- Focused on each area of observation

- Some are overall organizational recommendations and others are more program specific

- Align with NNPH Strategic Plan Priorities and Goals

- Reviewing current productivity/program expectations (adjusting staffing to meet current demand)

- Creating more patient-centered workflows in clinics

- Evaluating "clinic-based" services – are these better served in the community via outreach activities?

- Reviewing opportunities to leverage technology in service utilization, client convenience, and satisfaction with programs and services

- Reviewing community partnerships and service referral patterns

- Reviewing current organizational structures for programs and services to deliver clinical supervision

Where to start . . .

- **Prioritize recommendations:**
  - Some recommendations are already in progress
  - Focus on areas that affect all: Communications, Culture, and Administrative Functions
  - Short term versus long term

- **Sharing recommendations/changes:**
  - Based on plans by Division Leadership
  - Bring in CCHS managers once some initial decisions are made and teams created
  - Discuss with BOH to gain buy-in once there is a clear direction
  - Communicate to external stakeholders once workplan is developed