## Optimizing Member Outcomes:

# A Deep Dive into Quality Management Strategies

Presentation By:

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#### Part One:

- → Data Overview: Cleaning, Preparation & Discrepancies
- ♦ Potential Areas for Improvement
- ♦ Key Metrics & Action Items

#### **Part Two:**

- Auditing Processes to Inform Training
- Measuring Training Effectiveness
- Incorporating PT Managers into Auditing & Training
- Scalability of Systems with Department Growth



# Data Overview: Cleaning & Preparation

Following cleaning and preparation, the data was formatted into a table and served as the basis for the creation of multiple pivot tables and charts in Excel.

Raw data consisted of <u>3,590</u> records.

1,017 records had all data fields populated.

**2,573** records had missing data fields.

1,194 members had a video call date but no enrollment date.1,814 members had a video call & enrollment date but no start treatment date.

#### Added the following calculated columns:

Days from Sign Up to Initial Video Call
Days from Video Call to Enrollment Date
Days from Sign Up to Enrollment Date
Days from Start Date to Last Session
Episode of Care: Start to End Date
Discharge Rate: Last Session to End Date

## Discrepancies to Note



It is imperative to address missing data and errors to ensure that calculations are not skewed.

The following discrepancies were noted during the data cleaning process:

9 instances where End Treatment Date was logged as a date earlier than Start Treatment Date

Yielded a <u>negative</u> value when calculating Episode of Care.
Thus, this data was not omitted for the calculation.

30 instances where Last Session Performed took place after the End Treatment Date

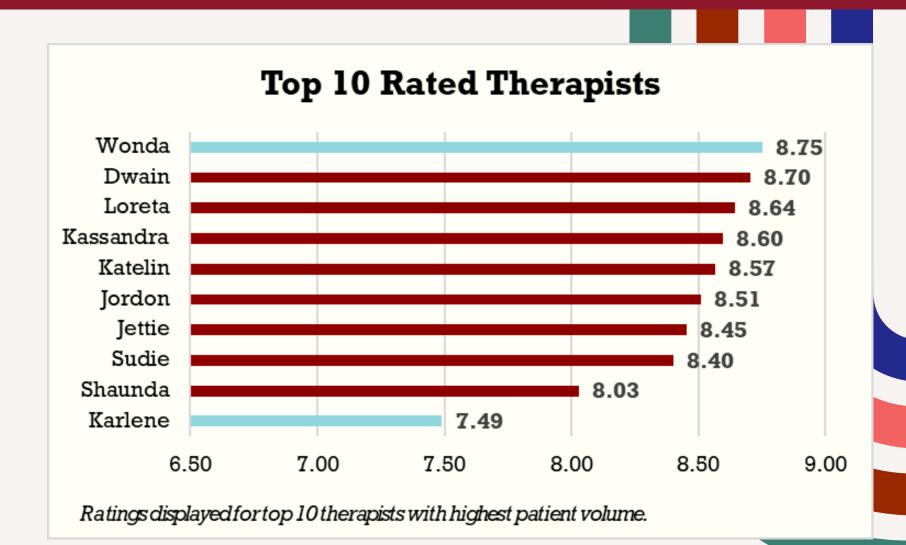
Yielded a <u>negative</u> value when calculating Discharge Rate.

Thus, this data was omitted for the calculation.

<u>3</u> instances where the Video Call Date was <u>not</u> entered but remaining dates were entered.

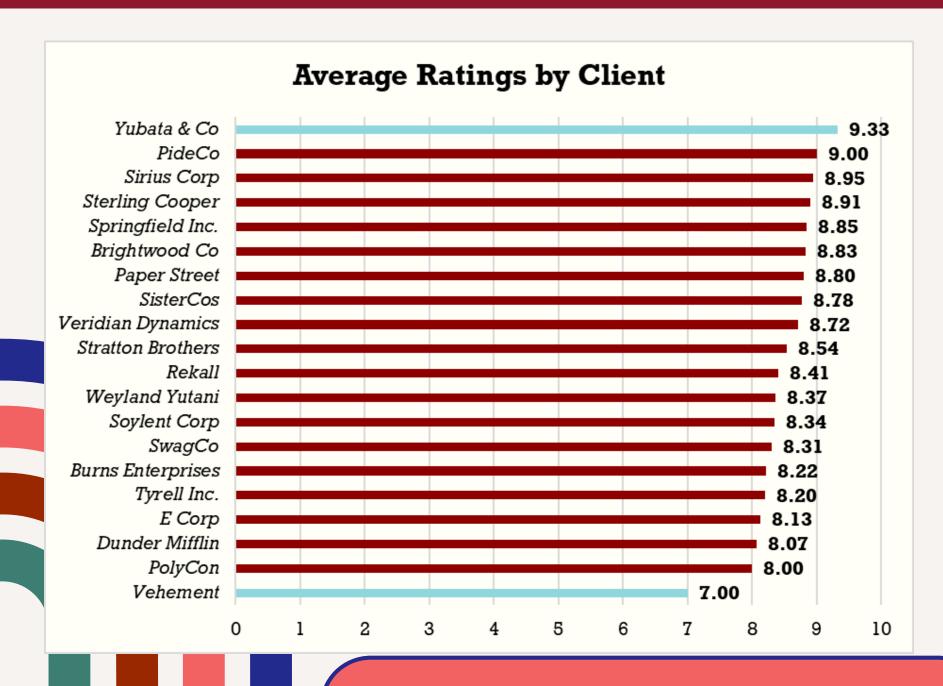
All instances occurred where the therapist was *Katelin*.

### Therapist Performance Overview: Ratings, Top Performers, and Client Feedback



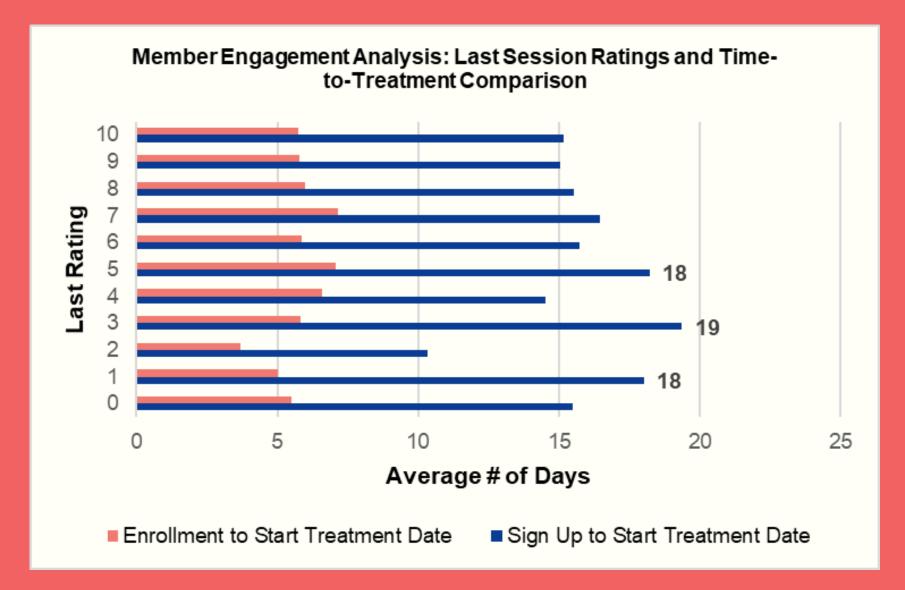


- <u>Wonda</u> is the <u>highest</u> rated therapist with an average last session rating of **8.75**.
- <u>Karlene</u> is the <u>lowest</u> rated therapist with an average last session rating of **7.49**.



- Yubata & Co has the highest average rating of 9.33.
- **Vehement** has the lowest average rating of **7**.

## Time to Treatment Analysis

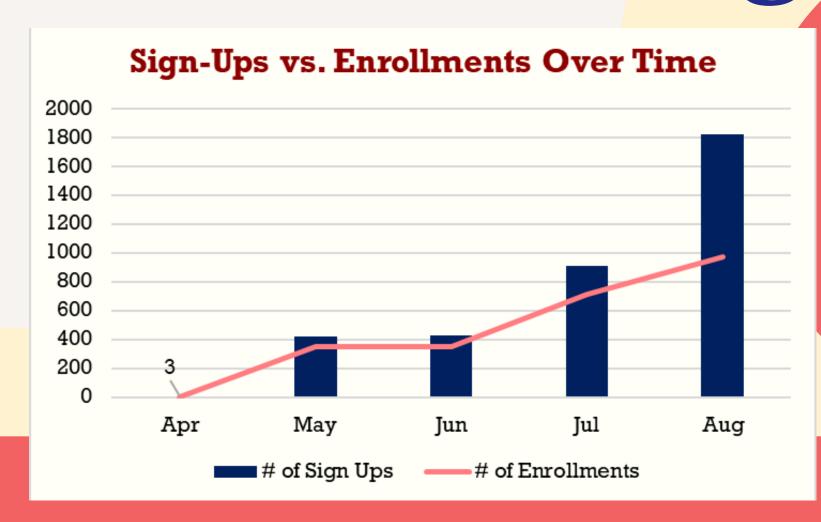


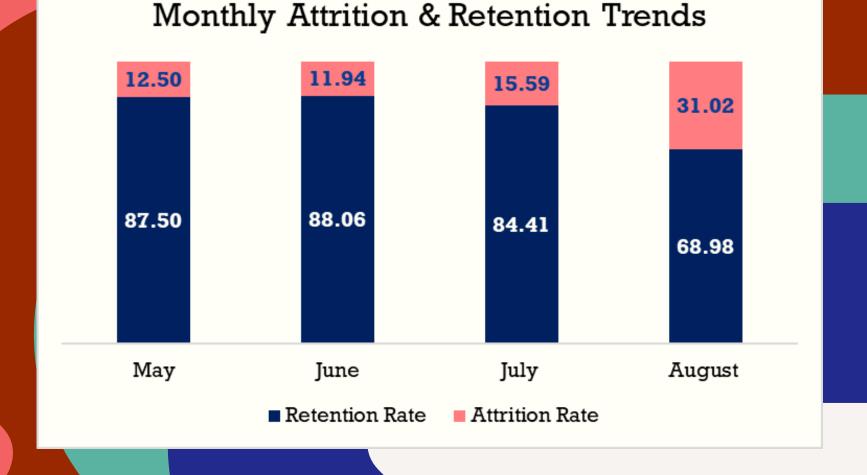
- The average # of days from Enrollment to Start
   Treatment Date is ~6 days for each rating.
- Rating 0-5 had the <u>longest average timelines</u> (>
   15 days) from Sign Up to Start Treatment Date.
- <u>Longer wait times</u> may impact overall member satisfaction, as reflected by <u>low session ratings</u>.

Average # of Day From:	200
Sign Up to Initial Video Call	7.03
Video Call to Enrollment Date	2.77
Sign up to Enrollment Date	9.71
Enrollment to Start Treatment Date	6.73
Start Date to Last Session	25.57
Sign Up to Start Treatment Date	16.27
Average of Episode of Care: Start to End Date	53.97
Average of Discharge Rate: Last Session to End date	19.07

- Initial Contact time is ~ 1 week from Sign Up Date
- Enrollment rate is ~10 days from Sign Up Date
- Treatment Initiation Rates
  - ~ 1 week from enrollment to start treatment
  - ~ 16 days from sign up to start treatment
- <u>Treatment Duration</u> is ~26 days from start to last session date
- Average EOC is ~54 days from start to end dates
- <u>Discharge rate</u> is ~ 19 days after the last session

## Patient Engagement Trends





- Overall *positive* trend in patient engagement, with a significant increase in sign-ups and enrollments from June to August.
- July experienced a notable surge in engagement, while August saw a substantial increase in sign-ups.
- Growth rate of enrollments is relatively lower in comparison to sign up rate.
- Suggests potential areas for optimizing the enrollment process to align with the increased interest generated by signups.

- Retention Rate = (# of Last Sessions / # of Enrollments) \* 100
- Attrition Rate = Retention Rate 100
- May and June indicate better retention and lower attrition, while July starts to show a slight decline.
- August stands out as a <u>critical month</u> with the lowest retention rate and the highest attrition rate.
- Further investigation into the reasons for the observed drop in engagement during August may provide insights into areas that require attention or improvement.

# Areas for Improvement: Optimizing Member Outcomes

The following audits will be covered in order of prioritization.

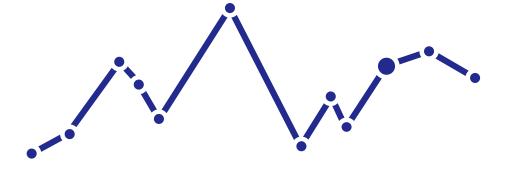
## Data Driven Decision Making

<u>Audit Criteria:</u> Evaluate the accuracy and effectiveness of data utilization/analysis in decision making process.

#### **Key Metrics:**

- **Data Accuracy:** Is the data accurately reflecting the information it is intended to represent?
- Data Completeness: Identify missing data and ensure all required data fields are complete
- Data Consistency: Check data formats for uniformity
- **Timeliness:** Is the data up to date and does it reflect the most recent information?
- **Data Validation:** Validate the data against expected ranges/values to ensure it meets quality standards
- Audit Trails: Review the audit trails to track the changes made to the data overtime

Improved data accuracy and quality ensure that decisions are grounded in reliable information, leading to more effective member outcomes.



- Implement data quality checks to enhance accuracy.
- Implement proper training to ensure proper documentation and recording of data
- Conduct training sessions on data interpretation for decision-makers.

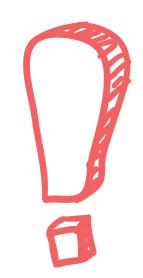
## Optimize the Treatment Initiation Process

Audit Criteria: Assess the efficiency of the treatment initiation process.

**Key Metrics:** 

- Average time from sign-up to start treatment date.
- Average time from enrollment to start treatment date.
- Identification of bottlenecks in the initiation process (i.e. intake, insurance verification etc.)

Streamlining the initiation process reduces wait times, enhancing member satisfaction and expediting beneficial therapy sessions.



- Implement process automation where possible.
- Develop standardized workflows that clearly define the steps involved from sign up to start treatment dates.
- Provide training sessions for therapists on efficient and effective treatment initiation processes.

## Enhance Therapist Training, Onboarding & Support

<u>Audit Criteria:</u> Evaluate therapist performance and identify areas for improvement.

A well-trained and supported therapy team contributes to higher member satisfaction, as therapists are better equipped to deliver quality care.



#### **Key Metrics:**

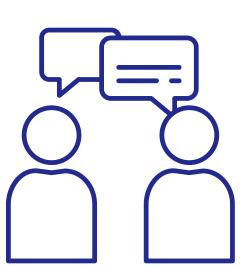
- Average session ratings by therapist.
- Number of completed treatments per therapist.
- Feedback from therapists regarding training and support.

- Provide targeted training programs based on feedback.
- Establish mentorship or support systems for // therapists.

## Refine Communication Strategies

<u>Audit Criteria:</u> Assess the effectiveness of current communication strategies.

Clear and effective communication fosters member engagement and understanding, positively influencing overall member satisfaction.



#### **Key Metrics:**

- Member satisfaction scores related to communication.
- Member preferences for communication channels.
- Response time to member inquiries.
- Usage rates of different communication channels.

- Conduct member surveys to understand preferences.
- Conduct A/B testing of different communication messages or formats to identify what resonates best with members.
- Send timely and targeted notifications to keep members informed about upcoming appointments, program updates, or relevant educational content.

### Develop Segmentation-Based Strategies

<u>Audit Criteria:</u> Analyze member outcomes across different segments.

Segment-specific strategies allow for targeted interventions, ensuring that diverse member needs are met effectively, leading to improved satisfaction.



#### **Key Metrics:**

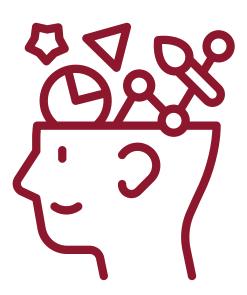
- Member satisfaction scores by segment.
- Engagement rates by segment.
- Treatment success rates by segment.

- Implement personalized approaches based on segment-specific needs.
- Implement predictive modeling to anticipate future behaviors and preferences of different segments.
- Tailor marketing and communication strategies to different segments.

### Member Education & Support

Audit Criteria: Assess the availability and effectiveness of member education.

Informed and supported members are more likely to actively engage in their treatment, fostering positive outcomes and satisfaction.



#### **Key Metrics:**

- Utilization rates of educational resources.
- Member understanding of treatment processes.
- Member-reported level of support.



- Develop educational materials and establish support systems.
- Create a knowledge hub with treatment related resources.
- Promote the availability of educational resources to members.

## Maximize Member Retention Rates

**Audit Criteria:** Analyze reasons for member attrition.

Improved member retention rates contribute to sustained engagement, fostering longterm satisfaction and successful therapy outcomes.



#### **Key Metrics:**

- Member retention rates over specific time periods.
- Common reasons cited for attrition.
- Effectiveness of retention strategies implemented.

- Conduct exit interviews with members leaving the program.
- Implement targeted retention strategies based on findings.

## Implement Continous Feedback Loops

<u>Audit Criteria:</u> Assess the effectiveness of current communication strategies.

A continuous feedback loop ensures that member concerns are addressed promptly, leading to continuous improvement and heightened member satisfaction.



#### **Key Metrics:**

- Frequency and volume of member feedback submissions.
- Responsiveness to member feedback.
- Implementation of improvements based on feedback.

- Implement mechanisms for members to provide ongoing feedback.
- Hold regular meetings involving key stakeholders, including therapists, member support, and management, to collaboratively analyze common themes and insights derived from member feedback submissions.

## Part 2: Designing, Managing and Evaluating Training Operations

## Auditing Processes to Infrom Training

- Establish a regular audit process to assess the performance of PTs during member interactions, focusing on specific actions that align with positive member outcomes.
- Use data metrics such as session ratings, treatment duration, and member engagement timelines to identify areas needing improvement.
- Example: Identify therapists with consistently low session ratings.
  - Regularly audit session ratings for each therapist to identify those consistently receiving lower ratings.
  - This insight informs training by highlighting specific behaviors or communication skills that may need improvement.
  - For instance, if therapists like Karlene consistently have lower ratings, training programs can be tailored to address communication or engagement techniques.

### Measuring Training Effectiveness

- Utilize key metrics, such as average session ratings and treatment success rates, as benchmarks for training effectiveness.
- Conduct pre- and post-training assessments to gauge PTs' knowledge, skills, and adherence to desired behaviors.
- Solicit feedback from both PTs and members regarding the perceived impact of training on their interactions and outcomes.
- Example: Assess the impact of training on reducing the time from sign-up to start treatment.
  - Before implementing training, measure the average time from sign-up to start treatment.
  - After training, reassess this metric to determine if there's a noticeable reduction.
  - A successful training program should result in improved efficiency, reflected in decreased timelines and improved session ratings.
  - Gather feedback from PTs on the relevance and effectiveness of the training modules.

## Incorporating PT Managers into Auditing & Training Processes

- Involve PT managers in the auditing process to provide a hierarchical perspective and ensure consistency in performance evaluation.
- PT managers can participate in defining audit criteria, conducting audits, and delivering feedback to individual PTs.
- Collaborate with PT managers to tailor training programs based on specific departmental needs and performance trends.
- Example: Collaborate with PT managers on identifying bottlenecks in the initiation process.
  - PT managers, being closer to day-to-day operations, can actively participate in auditing and identifying bottlenecks in the initiation process.
  - They can provide valuable insights into specific challenges their teams face.
  - Collaboration ensures that training addresses real-world issues, and PT managers can play a role in delivering targeted feedback during audits.

### Scalability of Systems with Department Growth

#### **Online Training Platforms**

- Develop an online training platform that hosts interactive modules, video tutorials, and assessments.
- Adopt a modular training approach that focuses on individual skills or areas of expertise.
- Provide flexibility for PTs to access training materials remotely, allowing scalability without the need for physical presence.
- These platforms can track progress, quiz results, and engagement, providing insights into the effectiveness of the training.

#### Standardized Workflows & Documentation

- Create standardized workflows and documentation for common procedures and interactions.
- Standardized materials serve as a reference for PTs, ensuring consistency in their approach.
- As the department grows, new PTs can easily access and follow these standardized workflows, maintaining quality and efficiency.

### Scalability of Systems with Department Growth

#### **Mentroship Programs**

- Establish a mentorship program where experienced PTs guide new team members, promoting scalability without compromising quality.
- Ensures that as the number of PTs increases, there's a sustainable mechanism for on-the-job learning and continuous improvement.



#### **Regular Training Updates**

- Implement a schedule for regular updates for training materials.
- As the department grows, treatment methods, technologies, or best practices may evolve.
- Establish a routine for updating training materials to keep them current and relevant.
- Ensures that all PTs, regardless of when they join, have access to the latest information.

### Scalability of Systems with Department Growth

#### **Interactive Simulations**

- Integrate interactive simulations or roleplaying exercises into the training.
- Simulations provide a hands-on experience and can be scaled for different scenarios.
- This approach allows PTs to practice realworld situations, improving their readiness to handle diverse member interactions.

#### Feedback Loops with PTs

- Set up regular feedback sessions with PTs to gather insights on training effectiveness.
- Establish a mechanism for PTs to provide feedback on training modules.
- This iterative feedback loop ensures that the training adapts to the needs and preferences of the PTs, making it more effective and scalable.

## KEY STRATEGIES FOR OPTIMIZING MEMBER OUTCOMES: A RECAP

- Overall Strategy:
  - o Continuous Improvement Approach:
    - Foster a culture of continuous improvement by involving PTs and managers in refining training methods.
    - Establish a feedback loop, using audit findings to regularly update and enhance training materials.
  - Data-Driven Decision Making:
    - Leverage the data-driven approach to inform training decisions, aligning strategies with identified areas for improvement.
- Integrating these strategies, facilitates the creation of a dynamic training program that addresses current challenges, adapts to evolving team needs and supports departmental growth while focusing on delivering high-quality care.

## Thank you! Any questions?