

Front Desk Best Practices

UMHS RAHS Health Centers

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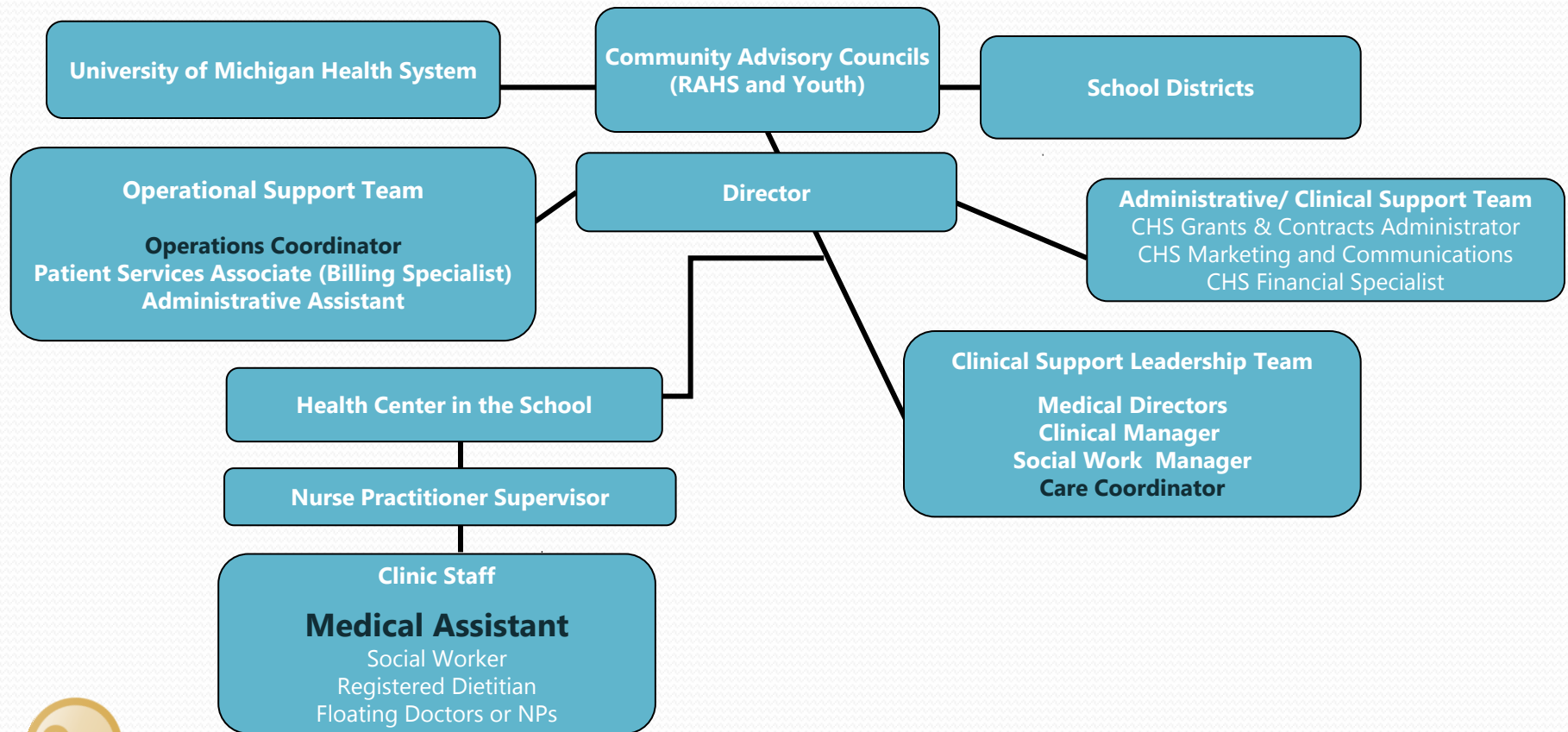
REGIONAL ALLIANCE FOR HEALTHY SCHOOLS
UNIVERSITY OF MICHIGAN HEALTH SYSTEM

Who We Are

Regional Alliance for Healthy Schools

- Medical Assistants
 - Shajuan
 - Sheila
 - Sherry
 - Starla
- Operations Coordinator
 - Anne
- Care Coordinator
 - Nancy

RAHS Organizational Chart



Collaboration **within** clinic staff, **among** the clinics, and **with** supportive administrative staff advances the efforts of our school-based health centers!

Content

- **Before the Appointment**
 - Clinic Operations & Compliance
 - Relationships with School and Community
 - Prepping for the Appointment
- **Appointment Time**
 - Motivational Interviewing
 - Checking-In
 - Patient Visit Types and Tools
 - Appointment Actions
 - Checking-Out
- **After the Appointment**
 - Care Coordination & Care Gaps
- **Question and Answer Panel**



The Key indicates Simple, Best Practices for your clinic!



Before the Appointment

Clinic Operations



- Internet/Secure, Encrypted Network
- Phones
- Immunizations
- Posters (patient rights and responsibilities)
- Obtaining and maintaining equipment
 - BP machines, spirometry, vision screen machine, refrigerator/freezer, RAAPS computer, etc...office and medical supplies/materials
- Ordering and maintaining supplies
 - immunizations
 - medical and office supplies
- Consent Forms, HIPAA information, etc...
- Creating an adolescent-friendly environment



Ensure your clinic is in compliance with all fiduciaries, your operating health system, and all other policies before seeing patients.

Compliance Focus Areas

Who We Are Accountable To :

The Joint Commission, UMHS (health system), State Health Department, Local Health Department, and School-District Administrations.

Compliance Measures :

- **Daily** checks of: red bag, oxygen, refrigerator/freezer, room temp, and humidity
- **Weekly** checks: eye wash station, data logger
- **Monthly** checks: balancing immunizations with MCIR, medication review, centrifuge, expired medication and supplies
- **Quarterly:** required tracking forms (GAS reports), lab inspections, lab proficiencies, rounds, pathology, BP cuff
- **Annually:** POC blitz, pharmacy review, mandatories (University education), RAHS Policy Review



Create a **single document with *all* compliance measures** listed to ensure none of these steps are missed.

Relationship with School & Community

- ✓ Community
- ✓ School Administration
- ✓ School Staff
- ✓ Students



Build strong relationships on all levels to help sustain and create new opportunities for your clinic and identify more at-risk youth.

School & Community Partnerships

School Functions and Community Events

- Sporting Events
- Ice Cream Socials
- Community Festivals

STI Blitz Events

- Collaboration with other organizations (health centers, health department, universities) to execute large-scale event.
- Collaboration with teachers to use classroom time

Immunization Blitz Events

- Collaboration with school office staff to identify students delinquent for immunizations and mail letters to parents referring to clinic.
- Collaboration with health department



Have a presence in the community to build relationships with other organizations; this helps to achieve goals and yield better outcomes.

School Partnerships



School Registrations and Open Houses

- Promoting clinic services, and partnering with school staff to identify students delinquent for immunizations prior to the start of the school year.

Classroom Health Education

- Dental Hygiene, to promote mobile dentist service
- Sexual health, to promote confidential services
- Nutrition counseling with registered dietitians, to promote services.



Having a presence outside of the clinic builds trust and relationships with staff and students, increasing use of health center.

Prepping for Appointment

- **Ensuring Consent form is on file.**
- Checking Immunization stock, if applicable.
- **Scheduling appointments by consulting:**
 - Overall school calendar (testing, count day)
 - Class Schedule (core academic classes and lunch)
 - *Ensure that a student isn't missing the same class frequently.*
 - Scheduling a medical interpreter, if needed.
- **Providing Student Passes**
 - **Emailing** teachers the day before or morning of, notifying of patient appointment.
 - **Calling** classroom to have student sent down for appt.
 - **Delivering** passes to classroom or teacher mailbox



Develop a method to **communicate with the school office** when a student is at the health center to prevent unexcused absences.



Appointment Time

Motivational Interviewing

What does motivational interviewing look like?

- Welcoming students to the clinic.
- Paying attention to body language.
- Framing a conversation to understand health concerns by asking questions.
- Fostering an environment of that is youth-friendly and is trustworthy.
- Teaching students how to advocate for themselves and be responsible for their own health.

EXAMPLE : Our clinic billing form teaches students about life skills and helps identify other risk factors.

EXAMPLE : Student presents with headache/stomach ache

"Is it cramping?" "Is it sharp pain?" "Did you eat breakfast?" "Are you feeling anxious?" "Did you get enough sleep?", etc...



Motivational Interviewing is a powerful tool used in patient interactions to **care for and learn more about a patient's care needs and concerns.**

Types of Patient Visits



- Immunizations
- BMI Screenings
- Well Child Checks/Sports Physicals
- STI Testing / Pregnancy (Confidential Testing)
- Urgent/Acute Care
- Asthma Visit/Exacerbation
- Social Work (& minor consented)
- RD Nutritional Counseling
- Venipuncture
- Groups
- Blitz Events
- Combined appointments (NP/RD, RD/SW)



When possible, **combining patient appointments reduces the amount of time a student is out of the classroom.**

Check-In Process



- **Greeting the Patient**
 - Utilize Motivational Interviewing.
 - Verify the patient, visit type.
- **Checking the Patient Snapshot in EHR**
 - Ensure a clinic consent form is on file.
 - Identify care system compliance gaps.
- **Utilizing the Patient Visit Sheet at each visit** to ensure completion of points of care.
 - Complete a **Risk Assessment** *annually*.
 - Complete a **Learning Assessment** *annually*.
- **Checking the Immunization Record**
 - Call parents for immunization consent, if they are scheduled.
- **Taking Vitals**
 - Height, weight, and blood pressure at every visit.



Remind the **patient of their rights and the confidentiality of clinic services.**



Using a **Patient Visit Sheet** for *every visit* helps **ensure that no patient information is missed at the visit.**

DATE	LABEL
RAHS PATIENT VISIT SHEET	
Check In	
____ Annual Billing/Rights and Responsibilities	
____ Parent Consent	____ Minor Consent
____ Learning Assessment	
____ RAAPS	UTD done today needs to be done
____ MCIR	UTD ____ see print out ____ no consent for Imms ____ VFC ____ PP
____ HT WT BP	UTD Ht. ____ Wt. ____ BP ____ BMI ____ BMI % ____
____ Other VS	Temp ____ Pulse ____ Resp. ____ Pain (1-10) ____
Date of last menstrual cycle ____	
Date of last PE ____ Needs one scheduled	
ALLERGIES ____ NKA	
MEDICATION ORDERS _____	
Other _____	
□	
NP/MD visit notes	



Using a **Learning Assessment** and *updating it annually* helps ensure that your patient understands what medical advice or instruction you give them.

LEARNING ASSESSMENT	
PRIMARY LEARNER	
<input type="text"/> Primary Learner Name	<input type="text"/>
Relationship	<input type="checkbox"/> Patient <input type="checkbox"/> Family <input type="checkbox"/> Spouse/Sig Other <input type="checkbox"/> Co-learner <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Parent <input type="checkbox"/> Other
Does the primary learner have any barriers to or consideration for learning?	<input type="checkbox"/> No Barriers <input type="checkbox"/> Reading Issues <input type="checkbox"/> Language <input type="checkbox"/> Vision Impaired <input type="checkbox"/> Hearing Impaired <input type="checkbox"/> Learning Issues <input type="checkbox"/> Physical <input type="checkbox"/> Pain/Discomfort <input type="checkbox"/> Emotional <input type="checkbox"/> Cognitive <input type="checkbox"/> Memory <input type="checkbox"/> Financial <input type="checkbox"/> Avail Resources <input type="checkbox"/> Spiritual <input type="checkbox"/> Cultural <input type="checkbox"/> Meals/Diet <input type="checkbox"/> Alternative Tx <input type="checkbox"/> Other
What is the preferred language of the primary learner?	<input type="checkbox"/> English <input type="checkbox"/> Arabic <input type="checkbox"/> Chinese <input type="checkbox"/> Japanese <input type="checkbox"/> Russian <input type="checkbox"/> French <input type="checkbox"/> Spanish <input type="checkbox"/> Vietnamese <input type="checkbox"/> Hmong <input type="checkbox"/> AM Sign Language <input type="checkbox"/> Other
Is an interpreter required?	<input type="radio"/> Yes <input type="radio"/> No
How does the primary learner prefer to learn new concepts?	<input type="checkbox"/> Listening <input type="checkbox"/> Reading <input type="checkbox"/> Demonstration <input type="checkbox"/> Seeing <input type="checkbox"/> Doing <input type="checkbox"/> Pictures/Video <input type="checkbox"/> Other
How does the primary learner define their interest in learning?	<input type="checkbox"/> High <input type="checkbox"/> Medium <input type="checkbox"/> Low
How does the primary learner define if they follow treatment/advice?	<input type="checkbox"/> Always <input type="checkbox"/> Mostly <input type="checkbox"/> Sometimes <input type="checkbox"/> Rarely <input type="checkbox"/> Never
CO-LEARNER #1	
Co-Learner Name (if applicable)	<input type="text"/>
Relationship	<input type="checkbox"/> Patient <input type="checkbox"/> Family <input type="checkbox"/> Spouse/Sig Other <input type="checkbox"/> Co-learner <input type="checkbox"/> Mother <input type="checkbox"/> Father <input type="checkbox"/> Guardian <input type="checkbox"/> Foster Parent <input type="checkbox"/> Other
Does the co-learner have any barriers to or consideration for learning?	<input type="checkbox"/> No Barriers <input type="checkbox"/> Reading Issues <input type="checkbox"/> Language <input type="checkbox"/> Vision Impaired <input type="checkbox"/> Hearing Impaired <input type="checkbox"/> Learning Issues <input type="checkbox"/> Physical <input type="checkbox"/> Pain/Discomfort



Specialty Comments in your EHR can **quickly communicate needs for medical information** including consent forms, billing forms, and health care needs like well child exams, asthma action plans, and risk assessments.

Epic Schedule In Basket Chart Telephone Call Refill Enc Transcribe Order Patient Station

Big, Bird IV Primary Cvg: TRICARE/TRICARE... MRN: 000000012 PCP: Cooke, David... DOB: 01/01/195
Pref Name: Yellow REF: None Age/Sex: 63 y.o

Patient SnapShot

SnapShot
Chart Review
Results Review
CareWeb Chart
Synopsis
Combined Appts
Appt Desk
History
Allergies
Problem List
Medications
Immunizations
Demographics

Comments: Narcotic Contract Form 12/01/12
19 open orders
Preferred Language: English

Specialty Comments [Show All](#) [Edit](#)

RAHS School Based Health Center
RAHS Consent Yes
Immunization Consent yes (mother consent 8/15)
RAHS Minor Consent Yes
RAAPS Completed yes 8/2/2015
Annual Billing Form 8/2/2015
Last HME 8/2/2015
Asthma Action Plan N/A
Learning Pref: 8/2/2015

Family Comments [Edit](#)
None

Care Team and Communications

CVS/PHARMACY #8006 - ANN
- 3535 PLYMOUTH RD., AT CO
GREEN ROAD
CVS/PHARMACY #8216 - ANN
- 1700 SOUTH INDUSTRIAL HI
MEIJER PHARMACY #173 - AN
MI - 5645 JACKSON RD
RITE AID-33251 PLYMOUTH R
LIVONIA, MI - 33251 PLYMOUT
UMHS HOMEMED PHARMACY
ARBOR, MI - 2850 S INDUSTR
CVS/PHARMACY #8023 - YPSI
1415 E. MICHIGAN AVE AT CO
HARRIS
K MART #3155 - BELLEVILLE, I
RAWSONVILLE RD

Medications

Appointment Actions

Completing Orders

- Administering immunizations
- POC testing
- Venipuncture
- Spirometry
- Nebulizer treatment
- Wound care
- STI testing and HIV testing



Check medical supply inventories prior to a patient appointment to ensure that supplies are available; this helps medical appointments take place quickly and smoothly.

Alternate Patient Visits

Immunization Blitz Events

- Supplies
- Encounters/labels
- Printing MCIRs

Mobile Dentist / Vision

- *Signed* consent forms
- Printing off class schedules
- Passes to return to class

Groups

- Scheduling @ Time
- Passes
- Need initial visits
- Assessments



Divide responsibilities as a clinic team for executing non-traditional patient visits; this makes it possible to have more of them.

Check-Out Process

Wrap-up

- Student Documents:
 - After Visit Summaries
 - VIS forms
 - Discharge Notes
 - Sending tangible forms, if needed
 - Pass back to class
- Verifying and completing patient encounter
- Updating Patient Snapshot

Follow-up

- Scheduling necessary follow-up appointments
 - Same provider
 - Different provider
- Messaging Care Coordinator about care needs/ tangibles
- Messaging a different clinic if student attends there



Communicate with other health providers or support staff during or shortly after appointment to ensure no care needs are missed.



After the Appointment

Care Needs

How are they identified?

- Registration Forms
- Parent Phone Calls
- RAHS Medical Appointments
 - Referrals from Medical Providers
 - Referrals from MA



Types of Care Needs

- **Medical Needs**
 - Immunizations
 - Well Child Exams
 - Asthma Care
 - Nutrition Care
 - Mental Health Needs
 - Rx Assistance
 - Medical Provider Referrals
 - Vision/Dental Services
- **Tangible Needs**
 - Housing Assistance
 - Food Resources
 - Clothing / Household Items
 - Utility Assistance
 - Transportation Assistance
 - Financial Assistance
 - Insurance Referrals/Assistance



Identify barriers (upstream factors) to a patient's health during the patient visit and refer to your case manager to address those barriers.

Care Coordination

• Vision Services

Addresses the barriers of transportation, time, and lack of insurance or finances by providing on-site services.

- Referrals from teachers & parents
- Students identified through vision screens are referred to the care coordinator



The MA is the key!

- Scheduling a vision event
- Recruiting patients for vision events.
- Corraling students on the event day
- Connecting with students *after* to distribute glasses.

• Continuum of Care

Tracking care for key chronic conditions, like asthma or obesity, across school years or clinic sites ensures care needs are met.

- Patient information is tracked in a database.
- Reports are provided to Site Supervisors frequently, to meet care needs.
- Care Coordinator makes introductory phone contact with new parents to offer RAHS services.
- The MA schedules appointments pertinent to the care need.

Care Gap Lists

Clinic Asthma Registry						
PatientID	Asthma Severity	Stage of Care	Flu Shot	Asthma Action Plan	Spirometry	
12345674	Mild, Intermittent	Appt Completed	Up to Date	6/7/2015	6/7/2015	
12345770	Exercise-induced	Appt Completed	Declined	Not Needed	Not Needed	
12345782	History of Asthma	Appt Completed	Up to Date	Not Needed	Not Needed	
12348524	Mild, Persistent	Follow-up Completed	Up to Date	5/8/2015	5/8/2015	
12345682	Mild, Intermittent	Initial Appt Needed		Needed	11/5/2014	
12345704	Severe, Persistent	Follow-up Scheduled		9/24/2015	9/24/2015	
12345333	Unknown	Initial Appt Scheduled		Needed	Needed	
12345869	Exercise-induced	Appt Completed		Not Needed	Not Needed	
12345789	Mild, Intermittent	Appt Completed	Up to Date	9/15/2015	9/15/2015	
12343586	Mild, Intermittent	Initial Appt Scheduled		Needed	10/4/2014	
12345312	Severe, Persistent	Follow-up Completed		8/5/2015	8/5/2015	
12345633	Mild, Persistent	Follow-up Scheduled		9/17/2015	Needed	
12345190	Unknown	Initial Appt Needed		Needed	Needed	



Frequently providing **care gap lists** to clinic staff about care needs ensures they are met through a team effort, and across school years.

Patient Care Coordination Form

- Shows a snapshot of patient information being tracked from registration forms, clinical encounters, parent phone calls.
- Shows stages of care and specific care needs for a patient.
- The MA schedules appointment needs from the PCC.

Patient Care Coordination		NANCY TEST	
Patient MRN		123456789	
Date of Birth		8/11/2000	
Student Status		Non-student	
Consent Type		Parent	
Notes			
Gender		F	
Grade		10	
Phone		734-998-2208	
PRIMARY CARE		IMMUNIZATIONS	
Well Child Check Date	8/4/2015	RAHS Imms Count/Blitz	BLITZ2
SW Request/Status	Yes, Registration	Imms Status Check Date	8/4/2015
Nutrition Request		Immunization Needs	Up to Date
RAAPS Date	8/4/2015	MCIR ID Number	123456789123
Contact	Not Needed	Imms Contact	
Contact Date			
ASTHMA CARE		NUTRITION CARE	
Classification	Mild, Persistent	Date of Nutrition Ed	9/20/2014
Clinic Care Status	Follow-up Appt Needed	Clinic Care Status	RD Follow-up Scheduled
Asthma Action Plan	Up to Date	RD Closed Date	8/20/2015
Spirometry	10/18/2014	RD [2 Month] F/U Due	10/19/2015
Controller Medication	None	NP [8 Month] F/U Due	6/11/2016
Flu Shot Status	Needed	BMI Percentile	89
PCP Management	PCP	Labs Completed	



Combine the care gap list with the patient care coordination form to aid the MA in scheduling *combined appointments*, meeting care needs and reducing time out of the classroom.



Questions?



Question 1

Aside from motivation interviewing training,
**what additional professional development
helps you in your role?**



Situation A

As an MA, the same kid walks in almost every day and asks for a snack.

How would you proceed?

Situation B

A student presents at the clinic saying, "I am so fat".

How would you handle this if...

- The child is *morbidly overweight*?
- The child is *extremely thin*?
- The child is *normal weight*?



Question 2

How do you see your role and/or your work contributing to the field of adolescent health?

OR

Why have you chosen to work with adolescents for the past several years?



Situation C

How do you handle a physical health crisis or emergency in the clinic *when a clinician is not available?*



Situation D

How do you handle a crisis or emergency in the school (not in the clinic)?