Mecklenburg County Public Health (MCPH)
Implementation Strategy of Consultant Recommendations

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Topics to Discuss

• Overview
• Projects
• High-Level Timeline
• Projected Cost
• Questions
Overview
Implementation Approach

- Reviewed and evaluated Navigant Consulting and Praxis Partners for Health recommendations
- Prioritized and aligned consultant recommendations into four (4) projects to support implementation
- Identified tasks that needed immediate action
- Identified key resources to support the projects
- Determined high-level timelines
- Identified projected costs
Projects

1. Executive Leadership Team and Divisional Program Reorganization
2. Electronic Medical Record (EMR) Optimization and Technology Assessment
3. Clinical Care Model Delivery Enhancements
4. Laboratory Financial Feasibility Assessment
### Project Crosswalk to Consultant Work Streams

<table>
<thead>
<tr>
<th>Projects</th>
<th>Consultant Work Stream Recommendations</th>
</tr>
</thead>
</table>
| 1. Executive Leadership Team and Divisional Program Reorganization | • Redesign Clinic Management Structure  
• Enhance Quality Programs  
• Restructure of PH Executive Leadership Team |
| 2. EMR Optimization and Technology Assessment  | • Enhance EMR Performance  
• Restructure Clinical Care Model Delivery |
| 3. Clinical Care Model Delivery Enhancements | • Restructure Clinical Care Model Delivery  
• Redesign Customer Contact Center / Call Center  
• Enhance Quality Programs |
| 4. Laboratory Financial Feasibility Assessment | • Strategic Laboratory Management Affiliation |
Projects
Executive Leadership Team and Divisional Program Reorganization

Project 1
Executive Leadership Team and Divisional Program Reorganization

- Praxis Recommendations
  - Reduce span of control at Executive Leadership Team level
  - Re-align program areas for greater oversight and accountability
  - Enhance clinical/medical oversight by Medical Director
Executive Leadership Team and Divisional Program Reorganization

• Execute a Reduction in Force (RIF) to restructure the MCPH Executive Leadership Team
• MCPH will develop a plan consistent with Mecklenburg County’s RIF policy
• Affected Positions:
  • Assistant Health Directors (2)
  • Medical Director
  • Senior Health Manager focused on planning and evaluation
Executive Leadership Team and Divisional Program Reorganization

• Revised Organizational Structure
  • Four program-specific Assistant Health Director positions with clearly defined areas of expertise
  • Medical Director position with greater organizational accountability through direct involvement in process improvement, quality assurance, and program management
  • Position focused on business operations (classification to be determined)
  • Senior Health Manager position focused on community engagement will be transferred to become part of the Population Health division
Executive Leadership Team and Divisional Program Reorganization

• Developmental Associates
  • Contract to support recruitment and selection process
  • Estimated Timeline: 75-90 days
  • Experience
    • NC Local Government Experience
• Assessment Center Process
  • Quantitative and qualitative feedback
  • Competency based testing
  • Panels with County staff and Subject Matter Experts
  • Significantly reduces subjectivity
  • Detailed information to make hiring decisions
Executive Leadership Team and Divisional Program Reorganization

• A competitive bidding process will be used to select a change management consulting firm with expertise in the following areas:
  • Organizational Development
  • Change and Transition Management
  • Diversity, Equity, and Inclusion
  • Employee Performance Management

• Consultants will Focus on:
  • Designing and implementing strategies to create a culture of employee engagement in MCHD
  • Empowering MCHD employees to do their best work each day
  • Building capacity with MCHD leadership to manage future change
# Executive Leadership Team and Divisional Program Reorganization

<table>
<thead>
<tr>
<th>Focus Areas</th>
<th>Estimated High-Level Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td>Reorganization of the MCPH Executive Leadership Team</td>
<td>FY18 Q1, FY18 Q2, FY19 Q1, FY20 Q1</td>
</tr>
<tr>
<td>Restructure Program Areas</td>
<td>FY18 Q3</td>
</tr>
<tr>
<td>Organizational Change Management Services</td>
<td>FY18 Q4, FY19 Q2, FY19 Q3, FY19 Q4, FY20 Q1</td>
</tr>
</tbody>
</table>
EMR Optimization and Technology Assessment

Project 2
EMR Optimization and Technology Assessment

• **Phase #1: Cerner Optimization**
  • Use the existing Cerner contract to leverage Cerner Professional Services to assist with immediate technological challenges through training and support

• **Phase #2: EMR Technology Assessment**
  • Contract with a health consulting firm to complete a technology assessment of EMR systems in the marketplace that meet the needs of MCPH
  • A competitive bidding process will be used to select the health consulting firm
EMR Optimization and Technology Assessment

• Phase #1: Cerner Optimization

Cerner Capability

<table>
<thead>
<tr>
<th>Priority Item</th>
<th>Description</th>
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</thead>
</table>
| Cerner Usage Analysis and Remediation| • Engage Cerner Professional Services to provide a detailed analysis, action plan, and training interventions  
• Document ways to improve Cerner optimization and conduct remediation and training to close identified gaps |
| Implement Patient Portal             | • Enable already owned patient login tool for self-serve functions, including test result and appointment notifications                       |
| Implement Power Chart Touch          | • Provide mobile device enablement so that practitioners can document in patient rooms, resulting in a more modern, optimized, and efficient clinical documentation practices |
**EMR Optimization and Technology Assessment**

- **Phase #1: Cerner Optimization**

  Technology and Equipment Capability

<table>
<thead>
<tr>
<th>Priority Item</th>
<th>Description</th>
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<tbody>
<tr>
<td>Cerner Forms</td>
<td>• Optimize the custom form request process with Cerner</td>
</tr>
<tr>
<td>Signature Pads</td>
<td>• Continue collaboration with Cerner on making consent forms enabled to be</td>
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<tr>
<td></td>
<td>signed electronically</td>
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<tr>
<td>Point of Care Printers</td>
<td>• Provide desktop printers in clinics in order to provide patients with</td>
</tr>
<tr>
<td></td>
<td>documentation at the end of their visit</td>
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</table>
EMR Optimization and Technology Assessment

• Phase #1: Cerner Optimization

Business Strategy

<table>
<thead>
<tr>
<th>Priority Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Establish Public Health Data Integrity Group</td>
<td>• Create a Public Health-driven group that focuses on data quality</td>
</tr>
<tr>
<td>Add Business Analysts positions (2)</td>
<td>• These positions will provide technical assistance and work-flow documentation for the EMR platform</td>
</tr>
<tr>
<td>Add Nurse Informatics positions (2)</td>
<td>• These positions will provide hands-on support to staff, ensure process adherence, and data quality for the EMR platform</td>
</tr>
</tbody>
</table>
EMR Optimization and Technology Assessment

• Phase #2: EMR Technology Assessment by a health consulting firm:
  • Scope of Work:
    • Current State
      • Document the current state of Cerner by workflow
    • Future State
      • Document the future state of the “ideal” EMR by workflow (software/hardware)
      • Document and analyze internal and external reporting needs
      • Develop a comprehensive Requirements Specifications Document (RSD)
      • Conduct market analysis of potential EMR vendors and consider Public Health specific needs/requirements
### EMR Optimization and Technology Assessment

<table>
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<th>Focus Areas</th>
<th>Estimated High-Level Timeline</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>FY18 Q1</td>
</tr>
<tr>
<td>Phase 1: Cerner Optimization</td>
<td></td>
</tr>
<tr>
<td>Phase 2: EMR Technology Assessment</td>
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</tbody>
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Clinical Care Model Delivery Enhancements

Project 3
Clinical Care Model Delivery Enhancements

• Contract with a health consulting firm to assist Public Health with implementing clinical care model delivery recommendations in the NW and SE clinics

• Health consulting firm must have nurses, providers and process consultants to provide support
  • Public health knowledge/experience is highly desirable

• MCPH is in the process of defining the scope of work and the expected deliverables

• A competitive bidding process will be used to select the health consulting firm
Clinical Care Model Delivery Enhancements

• Based on Navigant’s assessment, the focus areas will include but are not limited to:
  • Restructure clinical operations
  • Ensure providers and staff are practicing at “Top of License”
  • Enhance guidelines and expectations for all clinical staff
  • Enhance the Telephone Triage Program
  • Enhance Clinical Triage Program for walk-in patients
Clinical Care Model Delivery Enhancements

Proposed Management Structure

- Restructure Management team:
  - Medical Director
  - Assistant Health Director for Clinic Operations
- Other Practice Managers/Supervisors
- Proposed Structure:
  - Clinical
  - Administrative
  - Interpreters
  - Outreach
- Adjust Span of Control for Management.
## Clinical Care Model Delivery Enhancements

<table>
<thead>
<tr>
<th>Focus Areas</th>
<th>Estimated High-Level Timeline</th>
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</thead>
<tbody>
<tr>
<td>Reorganization of the Clinical Operations</td>
<td>FY18 Q1, FY18 Q2, FY18 Q3</td>
</tr>
<tr>
<td>Implement Enhancements</td>
<td>FY18 Q4, FY19 Q1, FY19 Q2, FY19 Q3, FY19 Q4, FY20 Q1</td>
</tr>
</tbody>
</table>
Laboratory Financial Feasibility Assessment

Project 4
Laboratory Financial Feasibility Assessment

- Contract with a health consulting firm with specific laboratory expertise to conduct a financial feasibility assessment and document alternative cost and operational models for MCPH’s consideration.
- A competitive bidding process will be used to select the health consulting firm.
- Based on the assessment findings, the health consulting firm may assist with contract negotiations, process design, accreditation changes, and ensure no reduction in laboratory standards or protocols.
# Laboratory Financial Feasibility Assessment

<table>
<thead>
<tr>
<th>Focus Areas</th>
<th>Estimated High-Level Timeline</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>FY18 Q1</td>
</tr>
<tr>
<td>Financial Feasibility Assessment</td>
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<tr>
<td>Develop &amp; Implement Sustainable Model for Laboratory Services</td>
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High-Level Timeline
# High-Level Timeline

<table>
<thead>
<tr>
<th>Project</th>
<th>Focus Area</th>
<th>Expected Completion</th>
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<tbody>
<tr>
<td>1. Executive Leadership Team &amp; Divisional Program Reorganization</td>
<td>Reorganization of the MCPH</td>
<td>FY18 Q2</td>
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<tr>
<td></td>
<td>Realignment of Programs</td>
<td>FY 18 Q3</td>
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<td></td>
<td>Organizational Change Management Consulting</td>
<td>FY19 Q4</td>
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<tr>
<td>2. EMR Optimization &amp; Technology Assessment</td>
<td>Phase 1: Cerner Optimization</td>
<td>FY18 Q3</td>
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<tr>
<td></td>
<td>Phase 2: EMR Technology Assessment</td>
<td>FY18 Q4</td>
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<tr>
<td>3. Clinical Care Model Delivery Enhancements</td>
<td>Reorganization of the Clinical Operations</td>
<td>FY18 Q4</td>
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<tr>
<td></td>
<td>Implement Enhancements</td>
<td>FY20 Q1</td>
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<tr>
<td>4. Laboratory Financial Feasibility Assessment</td>
<td>Financial Feasibility Assessment</td>
<td>FY18 Q3</td>
</tr>
<tr>
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<td>Develop &amp; Implement Sustainable Model for Laboratory Services</td>
<td>FY19 Q4</td>
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Projected Cost
## Projected Cost

<table>
<thead>
<tr>
<th></th>
<th>FY18</th>
<th>FY19</th>
<th>FY20</th>
<th>Grand Total</th>
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<tbody>
<tr>
<td>1. Executive Leadership Team &amp;</td>
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<td>Divisional Program Reorganization</td>
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<td>2. EMR Optimization &amp; Technology</td>
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<td>Assessment</td>
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<td>3. Clinical Care Model Delivery</td>
<td>$689,500</td>
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<td>Enhancements</td>
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<td>4. Laboratory Financial Feasibility</td>
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<td>$150,000</td>
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<td>Assessment</td>
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<td>Program Management Support</td>
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<td>Grand Total</td>
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<td>$850,776</td>
<td>$4,606,434</td>
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Questions