



Demystifying the Bureau of Primary Health Care Operational Site Visit

Grantee Enrichment Webcast

Tuesday, May 14, 2013

2:00pm – 4:00pm ET

Operational Site Visit (OSV): Purpose and Overview

- Provides comprehensive, objective, baseline “on the ground” information on the compliance and performance status of a health center during each project period.
- Occurs at least once every three years.
- Follows the Health Center Program Site Visit Guide which is updated annually.
- Essential component of Federal Health Center Program oversight and technical assistance.

Benefits

- Standard and comprehensive documentation, in the form of a Site Visit Report on the compliance status of each health center with the 19 key Health Center Program Requirements (PRs).
- Opportunity for onsite technical assistance (TA) from the consultant team and/or Project Officer on how to improve performance and/or address non-compliance.
- Valuable resources for:
 - Health center governing board, key management team, and Project Officer to use as a roadmap to address areas of non-compliance and performance improvement throughout the budget/project period
 - Health center strategic planning
 - Strong foundation of ongoing compliance and performance improvement

Who Participates

- A team of 3 consultants who have expertise across all 19 key Program Requirement areas: clinical, fiscal, and governance/administrative.
- Whenever possible, Bureau of Primary Health Care (BPHC) Project Officers (POs) and/or Branch Chiefs attend the visits.
- Primary Care Associations (PCAs) are also encouraged to participate.

Role of PCA

- OSVs for Newly Funded health centers:
 - PCAs are informed by BPHC about the OSV and expected to act as *observers*, by providing state-specific information to the site and information on areas in which the PCA can provide TA *following (not during)* the site visit.
- OSVs for existing health centers:
 - PCA may be notified of the site visit by BPHC and may attend – also in an observer role.

Logistics

- Coordinated by both PO and BPHC's TA contractor.
 - Date selection – PO and health center collaborate to decide on the best date and time.
- Consultants are selected from a pool of individuals with expertise in health center operations and have received training from BPHC.
- Visits are scheduled to be on average 2½ days in length.

Process: Before the Visit

- Formal email will be sent from PO confirming the OSV.
- PO and/or Consultant Team Lead will contact health center to:
 - Schedule a pre-site visit conference call.
 - Provide a list of documents for health center to gather and prepare for on-site review.
 - Confirm PCA Attendance.

Pre Site Visit Conference Call

- Introduce the site visit team:
 - Administrative/Governance Consultant
 - Financial Management/Information Management Consultant
 - Clinical Consultant
- Must also include the PO and if possible or as appropriate, the Branch Chief

Pre Site Visit Conference Call (cont'd)

- Describe the:
 - Purpose - PR compliance/TA where possible
 - On-site process - Entrance and Exit Conferences, agenda, document list (hard copy/digital), site tour
 - Expectations regarding management staff and board availability and participation during OSV
 - On-site logistics for site visit team, including work area
- Confirm site visit location
- Answer any questions

Health Center Pre Site Visit Preparation

- Health Center CEO/PD brief their management team and staff.
- Review the 19 Health Center Program Requirements.
- Review the Health Center Site Visit Guide.
- Ensure management team/Board member availability, including at least an hour of the CMO's/MD's time to meet with the Clinical Consultant.
- Schedule requested Board meeting. [NOTE: The Board is encouraged to attend both the Entrance and Exit Conferences.]
- The Board should expect to be asked about their understanding of the PRs, in particular PRs 17, 18 and 19, and may be asked its assessment of the health center operations
- Prepare on-site documents. Consultants may request that certain documents be sent to them prior to arriving onsite and may contact the health center CEO/PD directly regarding these documents.

What to Expect During the OSV: Entrance Conference

- Team will conduct an Entrance Conference to begin the first day.
 - Entrance Conference should be attended by key management staff and Board members, particularly Board leadership.
 - If PO or other HRSA/BPHC staff are in attendance, they may provide a brief presentation and/or participate in the entrance conference. PO may also participate by phone.
- Throughout the next 2½ days, the consultants will review documents, tour sites, meet with staff and Board members.

What to Expect During the OSV: Document Review

Documents requested for review would include but are not limited to:

1. Board minutes
2. Bylaws
3. Audit/financial reports
4. Management reports
5. Quality Improvement/Assurance plan and meeting minutes
6. Needs Assessment and Strategic plan
7. Contracts/collaborative agreements
8. Job descriptions
9. Clinical, financial and other policy and procedure manuals
10. Sliding fee discount program policy and procedures

What to Expect During the OSV: Common Clinical Areas of Review

- Tour of health center sites and review of hours of operation and staffing model (e.g. MDs; PA; CRNP; CNM; Dentists; DH; BH staff)
- Interviews with health center staff
 - Clinical Director/CMO
 - Clinicians and non-clinicians
- Credentialing and privileging policies and procedures
 - Status of files
 - Peer review process
- Delivery of required and additional services
 - Comprehensive Primary Care
 - Oral Health and Behavioral Health integration
 - Tracking and follow-up of contracted or referred services (Lab; X-ray; Specialty Referrals; Hospitalizations)

What to Expect During the OSV: Common Clinical Areas of Review (cont'd)

- After hours coverage process
- Quality Improvement/Assurance Plan:
 - QI/QA Committee meeting minutes
 - Service utilization analysis (e.g. productivity, appointment availability, no-show rates).
- Role of Governing Board:
 - Board meeting minutes
 - Clinical leadership and data to support board decisions.
- Analysis of selected clinical performance measures
- Status of Patient Centered Medical Home recognition and Electronic Health Records implementation

What to Expect During the OSV: Common Financial Areas of Review

- Interviews with health center CFO, Billing Manager, other selected staff
- Audited & interim financial statements
- Financial policies and procedures, including status of internal controls
- Financial and cost data
 - UDS data
 - A/R Aging
 - Patient/visit counts
- Schedule of Fees/Charges and Schedule of Discounts (Sliding Fee Scale)
- Budget
- Analysis of selected financial performance measures

What to Expect During the OSV: Common Administrative Areas of Review

- Interviews with health center CEO/PD, COO and other selected managers and staff
- Personnel policies
- Selected personnel files
- CEO performance evaluation
- Needs assessment



What to Expect During the OSV: Common Governance Areas of Review

- Interviews with health center board members
- Board/committee minutes
- Bylaws
- Status of patient majority board members
- Strategic planning activities

What to Expect During the OSV: Exit Conference

- The visit will end with an Exit Conference, typically mid-day on the third day of the visit.
 - Exit Conference should be attended by key management staff and Board members, particularly Board leadership.
 - Preliminary findings will be discussed and recommendations for resolution and/or additional TA will be provided.
 - If not onsite-PO may also attend by phone.
- The findings that are shared during the exit conference will generally be the same as will be found on the final Site Visit Report transmitted to the health center by BPHC but should still be considered preliminary.

What to Expect After the OSV

- The outcome of the OSV is the standard Site Visit Report completed by the consultant team and reviewed and transmitted in final by BPHC to the health center.
- The final Site Visit Report is expected to be sent to the health center no more than 45 days following the completion of the OSV.
- The report should be used by the health center's governing board, key management team, and PO as a roadmap to address areas of non-compliance and performance improvement throughout the remainder of the budget/project period.

What to Expect After the OSV (cont'd)

- Once health center receives the Site Visit Report, please DO communicate with your PO about any questions or concerns related to the site visit process and/or report findings.
- In the event of findings of non-compliance with PRs, be aware that the health center will have conditions added to their Notice of Award (NoA).
- BPHC with the PO as the central point of contact, will offer guidance and TA as appropriate to support the health center's success in addressing areas of non-compliance.
- The health center is expected to complete an evaluation of the OSV and the consultants.
 - The evaluation is provided to the health center within 5 days of the OSV completion.
 - Another evaluation will also be sent out 3 months post-OSV to determine impact.

Consultant Evaluation

Consultant Evaluation		Home	Logout
Task Order: CD-09-0076			
Start Date: 07/06/2009		End Date: 07/07/2009	
Organization: 16TH STREET CLINIC		Urban/Rural: Urban	
Organization's Contact: John Bartkowski		Organization's Phone No: 414-672-6220	
Branch: Northern Operations		Project Officer: Sarah Collins	
Type of Site Visit: OPR Follow-up TA		Type of Program: Community Health Center	
Date of Site Visit: 06/15/2009		Funding Start Date: 01/01/1980	
Consultant(s)			
Tyler, Michele			
SCALE			
0=Not Applicable 1=Poor/Strongly Disagree 2=Fair/Disagree			
3=Satisfactory/Neutral 4=Good/Agree 5=Excellent/Strongly Agree			
<u>Prior to the Site Visit:</u>			
Your Understanding of Purpose for Site Visit		Good/Agree	
Clear Communication Regarding Site Visit Preparation		Poor/Strongly Disagree	
Clear Communication Regarding Materials Required During the Site Visit		Poor/Strongly Disagree	
Clear Communication Regarding the Site Visit Process and Agenda		Poor/Strongly Disagree	
Received Site Visit confirmation Letter and Review Documents 0 weeks Prior to the Site Visit		Poor/Strongly Disagree	
Usefulness of Pre-Site Visit Conference Call (if applicable)		Not Applicable	
<u>The Site Visit:</u>			
Consultants		Tyler, Michele	
Knowledge of BPHC Program Expectations		5	
Knowledge of BPHC Policies and Procedures		4	
Consultant Demonstrated Effective Verbal Communication Skills		5	
Professionalism of Consultant		5	
Consultant well Prepared Prior to Arriving On-Site		5	
Ability to Understand the Communities Served by the Organization		5	
Ability to Understand the Organization's Marketplace		4	
Technical Expertise (i.e. Site Development, clinical, Fiscal)		4	
Ability to Handle Difficult Situations Sensitively		5	
Ability to Effectively Provide clear Feedback		5	
Average Score		4.7	
<u>Identify any Technical Assistance (TA) Which the Team provided during the course of the Site Visit:</u>			
Consultant	Usefulness of TA Provided		
Tyler, Michele	None		
<u>Suggestions to Enhance the BPHC Site Visit Process:</u>			
We received very short notice about the site visit, about 1 business day. Michele was not able to send an agenda prior to the visit due to the short notice, and we were not able to prepare any materials prior to the visit. We had to scramble to assemble the appropriate staff to enable productive meetings. Michele was excellent. She has a good grasp on CHC operations and challenges. She communicates well, even when communicating difficult information. A pleasure to work with, with valuable input!			
<u>Other Comments:</u>			

Understanding the OSV Report – What is in the report?

1. Basic information: health center name and address, consultant(s) and their review areas
2. Overview of the health center: some history, population and target area demographics; information relevant to the center's current operations
3. Participants, and if they were interviewed and attended Entrance and Exit Conferences
4. List of reviewed documents
5. List of documents left with the health center

Understanding the OSV Report – What is in the report? (cont'd)

6. Primary compliance issues, concerns, and/or performance improvement opportunities addressed during OSV.
7. Seven Sections that follow the Health Center Site Visit Guide, with each section populated with all 19 PRs and applicable performance improvement recommendations.
 - Section I – Need
 - Section II – Services
 - Section III-Management and Finance
 - Section IV – Governance
 - Section V - Clinical Performance Measures
 - Section VI - Financial Performance Measures
 - Section VII - Capital and Other Grant Progress Review
8. Each Program requirement will be reviewed, a finding will be stated and, where appropriate, a recommendation will be stated. The Performance Improvement Sections under each PR may also have findings and recommendations.

Compliance: Met and Not Met

- For OSVs, all PRs need to be designated as either **Met** or **Not Met** based on the consultant's review and judgment of the health center's operational/implementation of the 19 PRs.
- If **Met**, there will be information on health center operations that shows why the PR is met. There is no recommendation to be made for a **Met** PR.
- Although a PR may be designated as **Met**, there still may be a recommendation under the Performance Improvement Area that provides *suggestions* to the health center on a way to further improve some aspect of their operation.

Compliance: Met and Not Met (cont'd)

- If the designation of the PR is **Not Met** there will be a finding that specifically addresses and explains what part(s) of the program requirement is not met (some of the requirements have multiple components), and a recommendation that specifically provides *guidance* to the health center on what action(s) need to be taken to achieve compliance.
- There may also be performance improvement recommendations under a **Not Met** that provide additional *suggestions* to the health center on ways to improve other aspects of the operation that are related to the program requirement.

Compliance: Conditions

- If a PR is designated as **Not Met** in the final Site Visit Report transmitted to the health center, this finding will lead to a condition placed on the NoA.
- A condition on the NoA requires the health center to take a corrective action, within a specified time frame in accordance with the Progressive Action policy and process.
- The BPHC makes the final decision on all policy questions that may be raised in the report and on all consultant recommendations regarding the **Met** or **Not Met** status of a PR.

OSV Take Home Messages

- DO read and review the Health Center Site Visit Guide.
- DO make sure that health center key management staff and all member of the Board understand Health Center Program Requirements.
- DO prepare and share a list in advance of any Program Requirements and TA areas you want to specifically focus on during the OSV.
- DO make sure the health center CEO/PD, CMO are available to meet with the site visit team during the OSV.
- DON'T be afraid to ask your PO questions or for guidance about the Program Requirements.
- DO ask your PO if you have questions, concerns or comments about the OSV process PRIOR to, DURING or AFTER the visit.

Resources

- Health Center Program Requirements
 - <http://bphc.hrsa.gov/about/requirements/index.html>
- Health Center Site Visit Guide
 - <http://bphc.hrsa.gov/policiesregulations/centerguide.html>
- BPHC Technical Assistance Resources
 - <http://bphc.hrsa.gov/technicalassistance/TAAI/Resources.aspx>