

APPENDIX A: STORYBOARD TEMPLATE



LOCAL HEALTH DEPARTMENT NAME:	Pinellas County Health Department
ADDRESS:	205 Dr. ML King Street
PHONE NUMBER:	727-824-6900
SIZE:	650 Employees
POPULATION SERVED:	943,000
PROJECT TITLE:	Improved Access to Care for Primary Care

PLAN

Identify an opportunity and Plan for Improvement

1. Getting Started

There is a need to improve the eligibility process for Primary Care in Pinellas County. The improvement plan will allow for better access to care.

2. Assemble the Team

A team was assembled with key management in both Planning and Performance Improvement and Clinical Services. This team then negotiated with the Board of Commissioners, local hospitals, County Health and Human Services and Community Health Centers.

3. Examine the Current Approach

Currently, primary care clients are required to report to one location for eligibility where multiple documents must be provided and eligibility is rigid. Once enrolled the clients must then travel to another location for care. Specialty care is not currently offered.

4. Identify Potential Solutions

- Eliminate multiple visits for eligibility and care
- Simplify the eligibility process by eliminating rigid criteria
- Make eligibility and service location the same
- Initial service given regardless of eligibility

- Addition of specialty care
- Provide disease management and case management
- Have a \$5000 cap on money available for services per client to maximize the number of clients who could receive services
- Change eligibility period from 3 months to one year

5. Develop an Improvement Theory

By simplifying the eligibility process, required documentation and allowing clients to be seen initially at their first visit we are improving access to care.

DO

Test the Theory for Improvement

6. Test the Theory

The Pinellas County Health Department opened primary care clinics in three of its five health centers. There is one in the southern, one in the central and one in the northern part of the county. Each center had an eligibility team, admitting team and clinic team. This project focused on the eligibility team. This team utilized revised eligibility criteria that eliminated the need for proof of assets, citizenship & residency along with less restrictive requirements on income and the need for documentation at the first visit to help reduce the barriers clients were experiencing

while trying to access primary care services.

CHECK

Use Data to Study Results of the Test

7. Check the Results

A client survey was given at all Primary Care clinics comparing the previous process with the new process. Data was recorded in a spreadsheet which showed results indicating an increase in the ease of access to care. Indicators on the survey included: location, ease of seeing the doctor, eligibility, and overall satisfaction.

ACT

Standardize the Improvement and Establish Future Plans

8. Standardize the Improvement or Develop New Theory

The revised eligibility process will continue to be used in all clinics. There will however be more evaluation in the south clinic to improve statistics found on the client survey related to eligibility and difficulty being seen for treatment.

9. Establish Future Plans

Through further evaluation of captured data on our client survey we hope to continue to improve the eligibility process for primary care and make it easier for clients to access the care they need.