

R95 Workgroup Meeting Service Design

January 15, 2025

Substance Abuse Prevention and Control Bureau Los Angeles County Department of Public Health



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Payment Reform: Value-Driven Capacity Building Service Design Portfolio (2-G, 2-H, 2-I)

Purpose:

To support providers in adapting and applying organizational processes (i.e. service design) that align with efforts to better engage and offer services to a wider range of individuals who want to access, participate and complete treatment by lowering organizational barriers to care.

The What	The Why and How	Start-Up/Deliverable
2-G Process Improvement Implementation Plan Follow-Up	Operationalize FY 23-24 Service Design Implementation goals through use of evidence-based process improvement strategies and application of Plan, Do, Study, Act (PDSA). Deliverable: Completed Service Design Implementation/Investment Plan template by March 31, 2025.	One per treatment agency . Tier 1 - \$15,000 Tier 2 - \$20,000 Tier 3 - \$25,000. *Invoice required for deliverable based submissions.
2-H Customer Walk- Through	Obtain an understanding of how individuals accessing or receiving services experience your agency to help generate strategies for lowering the barrier to SUD treatment in each site and facilitate improved access to care for clients. Deliverable: Conduct the walk-through and submit the completed approved summary template by January 31, 2025.	One per identified agency Site Tier 1 - \$1,000 Tier 2 - \$1,000 Tier 3- \$1,000 *Invoice required for deliverable based submissions.



SUMMARY DESCRIPTION

The Service Design Implementation/Investment Plan (2-I) is designed to allow providers to outline the investments and service design changes your agency commits to implementing.

These service design changes are a result of the customer walkthrough and/or improvements you identified, through patient and staff input, improvements that will lower barriers to substance use disorder (SUD) care.



DELIVERABLE REQUIREMENTS

To meet the deliverable for participation in the Payment Reform Value-Driven Capacity Building

- Complete the Service Design
 Implementation/Investment Plan (2-I)
- ✓ Submit the results **by March 31, 2025**.



DISCOVERING AND PRIORITIZING FOCUS AREAS

- ✓ Customer Walk-through or
- ✓ Other patient feedback methodology

If you did not complete a walk-through, provide a detailed description of how your agency identified improvement areas based on the perspectives of your customers/patients.

Patient Advisory Group Focus Group Feedback forms Surveys Patient interviews

Resource

Customer Walk-Through (2-H) Guide, Summary Deliverable (pages 17-22)



FOCUS -- Increase Access And Engagement by:

- Lowering barriers to SUD care
- Attracting and better serving the R95 population
- Improving existing services



UNDERSTANDING THE CUSTOMER/PATIENT EXPERIENCE

Customer Experience in healthcare is how a patient perceives their interactions with a provider, it encompasses every step from first contact to discharge and referrals throughout the continuum.



WHO ARE YOU SERVING?

P	FR	SO	N
		30	

Human Being

Lives in the context of family, and community.

4 dimensions for experiencing care: physical, psychological, social, spiritual

PATIENT

- Ill health and it's assoc. suffering.
- Remains the same person they have always been
- Triggers fear/anxiety
- Experience of disease

CONSUMER

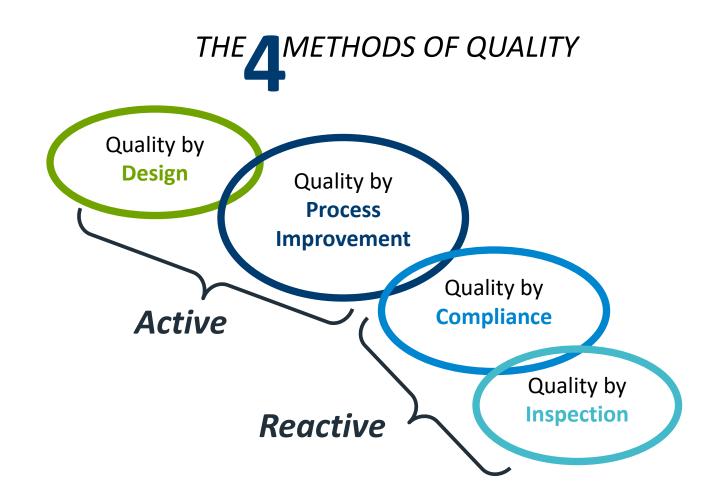
- Patient contacts & inter- acts w/ agency
- Patient takes on role of a consumer of services
- Remains the same person they have always been
- Experiences healthcare services



BENEFITS OF A POSITIVE EXPERIENCE

Improving access Improving retention Optimizes the agency workflows Improves staff satisfaction Enhances the agency reputation Reduces waste and saves money

Serving more people! Patients are thriving!





STEPS FOR COMPLETING THE TEMPLATE

Start with a **TEAM review** of your customer walk-through or patient feedback.

Engage your Exec. leadership and staff to identify priorities and brainstorm ideas.





STEPS FOR COMPLETING THE TEMPLATE

Review the Packet: Read pages 1–9 thoroughly before starting. *Example on page 7-9*

Submit: Complete and submit the form (*pages 2-5*) to SAPC by March 31, 2025.



FILLABLE AREAS

b. What was the staff's overall impression of the walkthrough or client feedback?

c. What key problems do executive leadership want to address? Please describe it in detail. (see the example scenario above for reference)

d. Describe how the patient and staff feedback informed your proposed design changes.



- A. Provide a clear summary of what the project aims to achieve.
- B. Describe why this focus area was selected.
- C. Identify key participants:
 - Internal stakeholders: Project sponsor, service staff, operations staff.
 - External stakeholders: Customers, referral sources, community partners
- D. Provide information on action steps, the person (or role) responsible, and completion date.
- (E. Key Performance Indicators: Define how success will be measured:
 - Quantitative Metrics: Customer satisfaction scores, service response time, wait time, admissions...
 - Qualitative Metrics: Customer feedback themes, staff feedback.
- F. Risks and Constraints: List potential risks or constraints that might impact goals, explain how your agency will address them.
- G. Provide a detailed description of how you will sustain the improvement.



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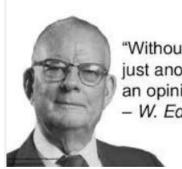
D Provide information on action steps, the person (or role) responsible, and completion date.

D. Action Steps	Person Responsible	Completion Date
How much detail is required?		



E. Key Performance Indicators: Define how success will be measured:

- Quantitative Metrics: Customer satisfaction scores, service response time, wait time, admissions...
- Qualitative Metrics: Customer feedback themes, staff feedback.



"Without data you're just another person with an opinion." – W. Edwards Deming



From **Data to Diagnosis to Delivery:** AI in Precision Medicine by Atul Butte, MD, PhD



Before we review the form does anyone have questions, observations, or insights?

