

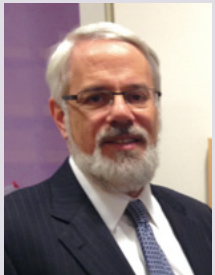
# BUSINESS ACTION GUIDE

Leading at the Intersection of People & Profits

## GET TO HIGH PERFORMANCE

### Empowering and Engaging the Front Line: Union Health Center

Frontline employees often belong to the same communities as the customer they serve. That's particularly true in industries like healthcare and retail, whose customers have become more diverse in recent decades. Frontline staff can be a source of customer insight as they interact with the customers every day. But that resource can only be tapped when management breaks down hierarchies



DR. KEN LAMPERT, CEO AND MEDICAL DIRECTOR



AUDREY LUM, CHIEF CLINICAL OFFICER

and takes the time to listen to their employees. To learn more about how to empower and engage front line workers, we spoke with two leaders at Union Health Center: Dr. Ken Lampert, CEO and Medical Director and Audrey Lum, Chief Clinical Officer. Union Health Center, Based in New York City, is a primary and multi-specialty care center that provides comprehensive patient-centered care in a friendly, open environment. The Center, with 120 staff and providers, serves mainly low-wage immigrant workers.

Our clinic was founded during the early 20th century in response to a crisis of infectious diseases, such as tuberculosis and influenza, which afflicted New York garment workers. By the 21st century, it was chronic diseases like diabetes and high blood pressure that became the epidemics. These are diseases that can't be cured, but can be controlled through patient self-management. In 2005, we found our traditional approach to care was not meeting the needs of our low-wage, immigrant population in achieving their self-management goals.

So we changed our model. We started with a group of people who were culturally and economically similar to our patients – our patient care assistants (PCAs). In a typical clinic, when you go to the doctor it is the PCA (also known as a medical assistant) who brings you to your exam room, takes your weight and blood pressure, and enters your vitals. Our PCAs still do all that, but they also do far more. We shifted to a team-based approach in which frontline staff performs relationship-based care management, including coaching and supporting patients around lifestyle changes, while physicians and other providers focus exclusively on patients' clinical needs. These are some key lessons we learned in the process:

#### 1. The team is the foundation

The first step we took was to organize the staff into teams. We now have two primary care teams and one specialty team. The primary care teams include six providers, six PCAs, one RN, two health coaches, one health coach/floor coordinator, and two patient support service staff. In addition to the usual medical assistant duties such as rooming, taking vital signs, preparing patients for visits, and scheduling, PCAs also work as part of a team that reviews patient charts for preventive protocols. All of our PCAs are bilingual and provide basic patient education around self-care in a culturally and linguistically appropriate way. Those who have been promoted to health coach work one-on-one with patients

to set their health goals, conduct follow-up calls, and lead group sessions for patients with chronic diseases. Health coaches typically spend 20 to 30 minutes with each patient, but may spend more time with a patient, if needed.

#### 2. Improved communication skills help the PCAs

Traditional medical assistant training does not include all of the things we expect from our PCAs. At Union Health Center, the PCAs learn about chronic diseases, and they learn how to slow down and help the patient figure out their needs. They also learn to improve their communication skills so they can effectively communicate with patients as well as with other staff and providers. So when we hire PCAs, we make sure they are open to having an expanded

job role. On the other side, we seek out providers who have worked in a team setting and are more likely to be open to respecting and listening to the PCAs. The result is that PCAs are becoming an effective conduit between patients and providers. PCAs speak the same language as the patient and they can help figure out why patients might be resistant to treatment, for example, if they can't afford their medication because of financial issues. The team can then work together to try and find a solution.

Empowering PCAs to speak up has resulted in other good outcomes as well. As one example, a doctor signed a prescription that had a different doctor listed as the prescriber so the PCA said, "There's a problem here," because they were part of the process. Our providers find it reassuring that someone is double checking for quality control so that mistakes like that can be corrected quickly rather than causing problems later.

### 3. Training time is essential – and needs to be protected

To make this shift, we developed a standard curriculum and provided a biweekly, nine-month PCA training. Their skills are kept current through ongoing trainings. In addition, we created a career ladder so that PCAs who pass all nine training modules can apply to advance to the position of health coach. As we changed the medical assistants to patient care assistants, we also changed the culture of the organization. We needed to get buy-in from the professional staff – doctors and nurses – and at the same time, we had to train and encourage the PCAs to play a different role than they were originally trained to do. The PCA training curriculum was developed by the providers, so they had a lot of investment and ownership in the process.

### FINAL WORDS OF WISDOM

By empowering and engaging our frontline staff, we learn more about what is really going on with the patient, which helps to improve outcomes. We have a significant increase in the number of patients we see while we keep the number of providers and PCAs steady. Patient outcomes have been extremely positive, staff and provider satisfaction is high, and turnover is low.

Every morning, pairs of providers and PCAs meet to plan the day, and there is a biweekly meeting with the whole team. Team meetings focus on clinical outcomes such as diabetes and other chronic condition measures, as well as connecting what people do every day to the bigger picture. We initially had four hours every week of protected team meeting and training time which was reduced to two hours, but we are still structured around it. We have had some turnover of team leaders so we are working to train the new ones and to rejuvenate and restructure the teams. The process needs care and maintenance – you can't just assume the new initiatives will continue, especially if you have turnover. The bottom line is that the team has to be the focus of innovation, and it can't just be top down. Ideas bubble up from the PCAs, who each have a strong role to play.

### 4. Health coaches keep patients on track

An individual has to complete their training and then work as a PCA with a provider for at least two years before they can apply to advance to the position of health coach. Then they are trained in motivational interviewing and patient education. Health coaches educate patients and support them in their health goals through face-to-face meetings and follow up calls. Patients are introduced to their health coaches via a hand-off from the provider, who will say something like, "Anna will meet with you now to educate you on taking your meds – is that okay?" The doctor essentially endorses Anna to educate the patient, but we want patient buy-in so they feel comfortable receiving the information from their health coach.

### HOW DO WE LEARN MORE?

[Hitachi Foundation Video: Care Team Redesign: Union Health Center](#)

[UCSF Center for the Health Professions: Union Health Center](#)

[Harvard Business Review: Here's How to Actually Empower Customer Service Employees](#)

[Smart Customer Service: Empower Customer-Facing Employees to Engage Customers](#)

[Inc. Magazine: How to Move Beyond Traditional Employee Feedback](#)

*Other companies that excel at empowering and engaging the front line include Zappos, Zingerman's, High Plains Community Health Center, and New Seasons Market.*

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