State Change Project 1

PDSA=B^3 (Better Bang for Oklahoma's Bucks)

For several years, Provider Certification staff has conducted one or more trainings to acquaint providers with annual revisions to the Standards and Criteria for program certification as articulated in the Oklahoma Administrative Code (OAC), specifically OAC 450. For many of the years prior to 2008, this training was conducted at numerous sites and at various times. Also, prior to 2008, staff prepared, copied, and distributed packets of materials that included complete copies of the applicable sections of OAC 450 and other information.

Performance Improvement Approach

Provider Certification utilized the traditional Plan-Do-Study-Act (PDSA) approach to document its activities. Each step is summarized below.

PLAN: Staff reviewed their experiences from previous years. This included their observations that prior trainings consumed significant amount of Provider Certification staff time and this resulted in disruptions to other essential operations for which the Division is responsible. Some recalled that the work leading up to those trainings had been stressful and hard to organize. Looking forward, staff determined that ODMHSAS had in place sufficient technological support to link various sites by video conferencing technology and that training should be organized to leverage these resources. Staff predicted that offering training through video conferencing would increase efficiency and satisfaction for providers and Provider Certification staff.

DO: The 2008 training was simultaneously broadcast on June 19 via videoconference technology between four sites—Oklahoma City, Lawton, and two sites in Tulsa. Each site was supported in person by Certification staff. The training was conducted in a PowerPoint format, with hard copies of the PowerPoint presentation provided to attendees. Training content emphasized revisions and presentations were grouped into chapters of OAC 450 (Standards and Criteria) that would likely permit providers to attend any or all segments of the training, based on their need and interests. No other materials were provided at the training sites but attendees were informed that the training materials as well as copies of the OAC 450 would be provided, at a later date, in an electronic format.

STUDY: Following training, Provider Certification staff led by Robin Grueser compiled estimates of effort and direct costs incurred in both 2007 and 2008. Those estimates are reflected in the following table.

Staff Time	2007 Hours	2008 Hours	Difference	%
Staff A	76	10	-66	-87%
Staff B	50	23	-27	-54%
Staff C	86	14	-72	-84%
Staff D	50	10	-40	-80%
Staff E	33	7	-26	-79%
Staff F	19	6	-13	-68%
Staff G	19	6	-13	-68%
Subtotal - Staff Time	333	76	-257	-77%
Average Hours per Staff	47.6	10.9	-36.7	-77%
Cost Efforts				
Printing, lodging, per diem, mail, etc.	$3,247	$579	($2,668)	-82%
Salaries/Cost of Benefits				
Staff A-E	$6,636	$1,227	($5,409)	-82%
Staff F-G	$614	$205	($409)	-67%
Benefits	$3,408	$673	($2,734)	-80%
Subtotal	$10,658	$2,105	($8,552)	-80%
Total- Estimate Costs	$13,905	$2,684	($11,220)	-81%

In summary, Provider Certification reduced staff time by 77 percent and direct costs by at least $11,000 or 81 percent as a result of the training re-design. The above reflects a relatively informal model to determine approximate costs for this single year-to-year comparison. Time of the Director(s), other ODMHSAS staff time or costs, and costs incurred by providers to participate in training in each annual session are not reflected.

ACT: Provider Certification staff subsequently reviewed the findings and recommends consideration of the following actions to continue the PDSA Cycle.

- Repeat training in similar format next year but look for elements to improve, including better real time interface between sites.

- Incorporate more trainer/participant interaction in future video conference trainings.

- Select video conference sites with tested compatibility with ODMHSAS system.

- Develop mechanisms to evaluate provider satisfaction.
    - Clarify provider expectation and needs related to future trainings.
    - Incorporate a provider evaluation element in future trainings.
    - Provide written summaries with updates on each revised OAC Chapter as an additional tool for use at the training.

- Evaluate timing of the training in relationship to the effective date of standards revisions.

- Determine if effective date of standards can be November 1 rather than July.

The providers have received this change very well, citing savings in terms of travel time and expenses, as well as minimizing the time staff is away from the office. The business gains from the change are significant; however we cannot directly tie this change to an increase in admissions or retention for our clients.