



PARTNERSHIP SUCCESS STORIES

Labor and management working together to improve care delivery and quality of work life



Labor and Management Work Together to Improve Behavioral Health Services

Interfaith Medical Center, Center for Mental Health

Part of the One Brooklyn Health System, Interfaith Medical Center is a community teaching hospital that serves more than 250,000 patients a year in Central Brooklyn. Interfaith Medical Center provides a comprehensive suite of mental health and substance abuse services and aims to become a Center for Excellence for the provision of behavioral health care. Consultants with the 1199SEIU Training and Employment Fund's Labor Management Project (LMP) provided organizational development and process improvement (PI) consulting to the Center for Mental Health (CMH), Interfaith's outpatient behavioral health facility, to help improve the patient intake process.

The Challenge

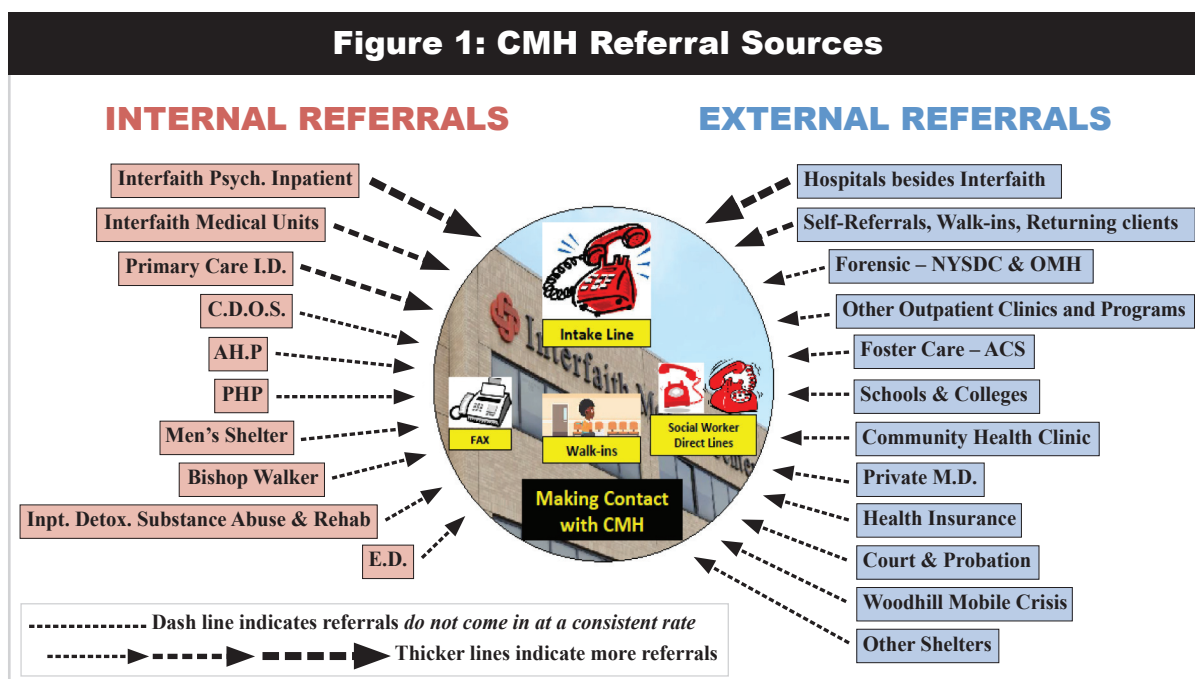
The demand for CMH services is high. Each week, the Center receives hundreds of calls and faxes from multiple referral sources and prospective patients (Figure 1). Before the PI project was launched, the CMH had an inefficient intake system that, along with high call volume, impeded access to services for some prospective patients.

Under the previous system, two social workers spent 30 percent of their time retrieving messages left on an intake voice mail line, contacting patients and referral sources to assess patient status and treatment needs, and scheduling intake appointments. This intake line lacked a phone tree, which led to urgent and non-urgent messages, including calls from providers and insurers, being saved in one queue. In addition, the newest phone messages were placed at the front of the voice mail queue for retrieval, with older calls being pushed back as new ones came in. This meant that staff would hear the newest calls first and often never hear older calls because all un-retrieved messages were automatically deleted after two weeks.

The Solution

Partnering with Bruce Richard, an 1199SEIU consultant, the LMP established a labor-management Self-Directed Care Team (SDCT) at the CMH. Meeting on a bi-weekly basis with an LMP consultant, the team began process mapping to visually diagram the steps in the intake process. Using the process map, the LMP helped the SDCT pinpoint inefficiencies and potential solutions. The exercise also helped foster a sense of team spirit within the CMH.

Figure 1: CMH Referral Sources





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After the SDCT constructed a process map, a PI team was established to overhaul the intake system. This team consisted of SDCT members and management representatives, giving workers an equal voice in solving problems in the workplace.

The LMP supported the PI team in identifying and prioritizing strategies to improve the intake process. The team chose to establish a phone tree so that incoming calls could be directed to the appropriate voice mail. This change significantly shortened the queues for each voice mail box and shortened the response time for each call. Union and management team members together developed the phone tree and the scripts for each voice mail.

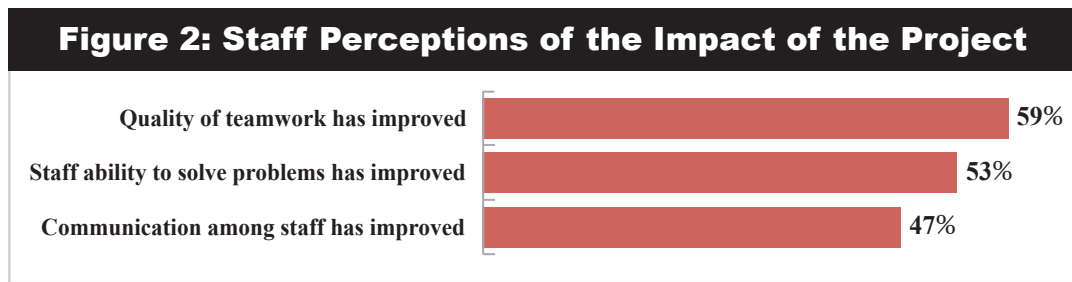
The SDCT also advocated for hiring an intake worker, and this request was approved by management and human resources. A part-time (60%) bachelor's level intake worker was hired in late January 2019.

The Results

Since the launch of the new phone tree and hiring of a dedicated intake worker, all messages are retrieved from the intake line daily and there is no longer a call backlog. In January 2019, 47 calls that had not been retrieved over a two-week period were deleted from the system. In February, no calls were automatically deleted from the system because all had been retrieved and handled.

Because of these improvements and the addition of a new staff member, the number of intakes scheduled each month has increased. For instance, in April 2019, 115 intakes were scheduled, a 95 percent increase over the 59 intakes scheduled in April 2018. An increase in the number of completed intakes also represents a larger patient roster and much-needed additional revenue for Interfaith, a hospital that faced closure in 2013 due to financial troubles. Moreover, one of the intake coordinators has reported that there have been fewer complaints from referral sources within the Interfaith system about a lack of response from the CMH.

The LMP surveyed union and management staff to assess the impact of the SDCT PI project on teamwork and relationships. Fifty-nine percent said the quality of teamwork had improved, and 53 percent reported that staff ability to solve problems was better (Figure 2). Nearly half believe communication among staff has been ameliorated.



POSITIVE FEEDBACK

Cali Torre, social worker and intake coordinator: "The new phone tree is very helpful. It is allowing me to focus on the urgent care referrals. I am now able to prioritize the in-house urgent care callers (which keeps things moving smoothly and greatly reduces the number of complaints about lack of response from the intake coordinators)."

Felix Pena, manager: "The phone tree has been extremely helpful in determining what calls are urgent care calls, as well as differentiating between self-referrals and provider referrals and in-house and outside referrals. Most callers from outside hospitals and agencies have expressed that the new voice mail message system is helpful."

THE LABOR MANAGEMENT PROJECT (LMP) is a consulting group that brings labor and management together to address the complex challenges facing today's healthcare organizations. Funded through collective bargaining, the LMP is overseen by a board of trustees with representatives from 1199SEIU United Healthcare Workers East and the League of Voluntary Hospitals and Homes of New York (an employer association and bargaining agent).

The LMP's mission is to support the partnership of labor and management health care teams to achieve positive work environments, excellent care and community wellbeing. Goals include increasing worker voice and involvement; enhancing the quality of care; improving patient and staff satisfaction; and increasing operational effectiveness and performance.

The LMP offers a broad range of services and strategies, including organizational development and labor-management consulting, process improvement facilitation, skill-building sessions, workplace and community health, and research and evaluation.