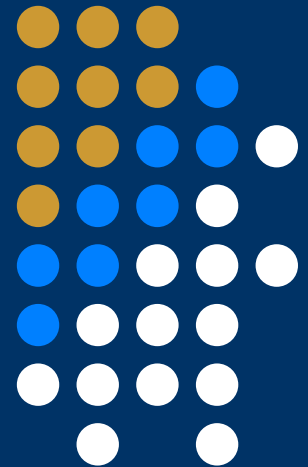


Puget Sound Call Center Coordination Project

Joe Cropley
Washington Poison Center

On Behalf of King County Healthcare Coalition and
Public Health Seattle and King County



Project Definition



- A consortium of call centers networked to provide medical phone triage as well as disseminate up-to-date public health information in King, Pierce, and Snohomish Counties

Potential Events



- Acute surge in medical needs of the community
- Reduction in overall healthcare infrastructure

Potential Demand

SARS Outbreak - Toronto 2003



- Mar 13: WHO health alert issued
- Mar 14: Toronto (pop. 4.6 million) confirms cluster related to alert
- Mar 15: Hotline established, 8am-11pm daily



Potential Demand

SARS Outbreak - Toronto 2003

- SARS Hotline receives >300,000 calls from Mar 15 to Jun 24
- Peak daily volume of 47,567 calls
- Primarily staffed by 200 public health nurses, 46 on day and 34 on evening shifts
- Aug 30: 44 deaths and 438 SARS cases

Project Objectives



- Accurately triage people with medical needs and direct them to the most appropriate venue.
 - *Reduce the number of outpatient visits*
 - *Reduce transmission of contagious diseases*
- Provide up-to-date information for the public regarding pertinent health issues and interventions during emergencies.

Increase Surge Capacity



- Assess existing call center capacity
- Recommend strategies to increase regional capacity to address 25,000 – 35,000 calls/day

Develop a Plan



- Standardized for King, Pierce, Snohomish
- Uniform medical phone triage guidelines
- Consistent delivery of health information messaging

King County Landscape



- 24-Hour Consulting Nurse Services

- Group Health
- Evergreen
- Harborview
- MultiCare
- Children's

Currently

2000-2500 calls/day

- Hospital Call Centers

- Swedish
- Virginia Mason
- Harborview
- MultiCare

*Central Scheduling, Paging,
Appointments*

“Overflow” Partners for PHSKC Public Information Call Center



- King County Crisis Clinic / 2-1-1
(King County ECC alternate site)
- Washington Poison Center
Current combined calls: 1000/day

University of Washington

Computing and Communications



- Large telecommunications infrastructure
- Phones + computers/Internet Access
- Facilities – campuses in all 3 counties
- *Volunteer medical professionals to staff?*

911 Dispatch



- Pandemic Flu Planning Assumptions
 - Reduction in service
 - No aid unit for flu-like symptoms
 - Limited dispatcher ‘scripts’
 - Transfer to triage hotline for home care

National Medical Lines *(currently assessing)*



- CareWise
- RegenceCare
- Aetna
- Healthways



Other Potential Partners

- Northwest Call Center Professionals Organization
- Manufacturing/Wholesale Industry
- Retail Sales Companies
- Airline/Hospitality Industry
- Wireless Services Customer Care
- Insurance Companies
- Non-Profit Groups

Colorado As a Model



- COHELP
 - West Nile Virus
 - Influenza Vaccine Shortage
 - Pneumonia concerns
 - Smallpox scare
 - Mold

COHELP

Lessons Learned to Date

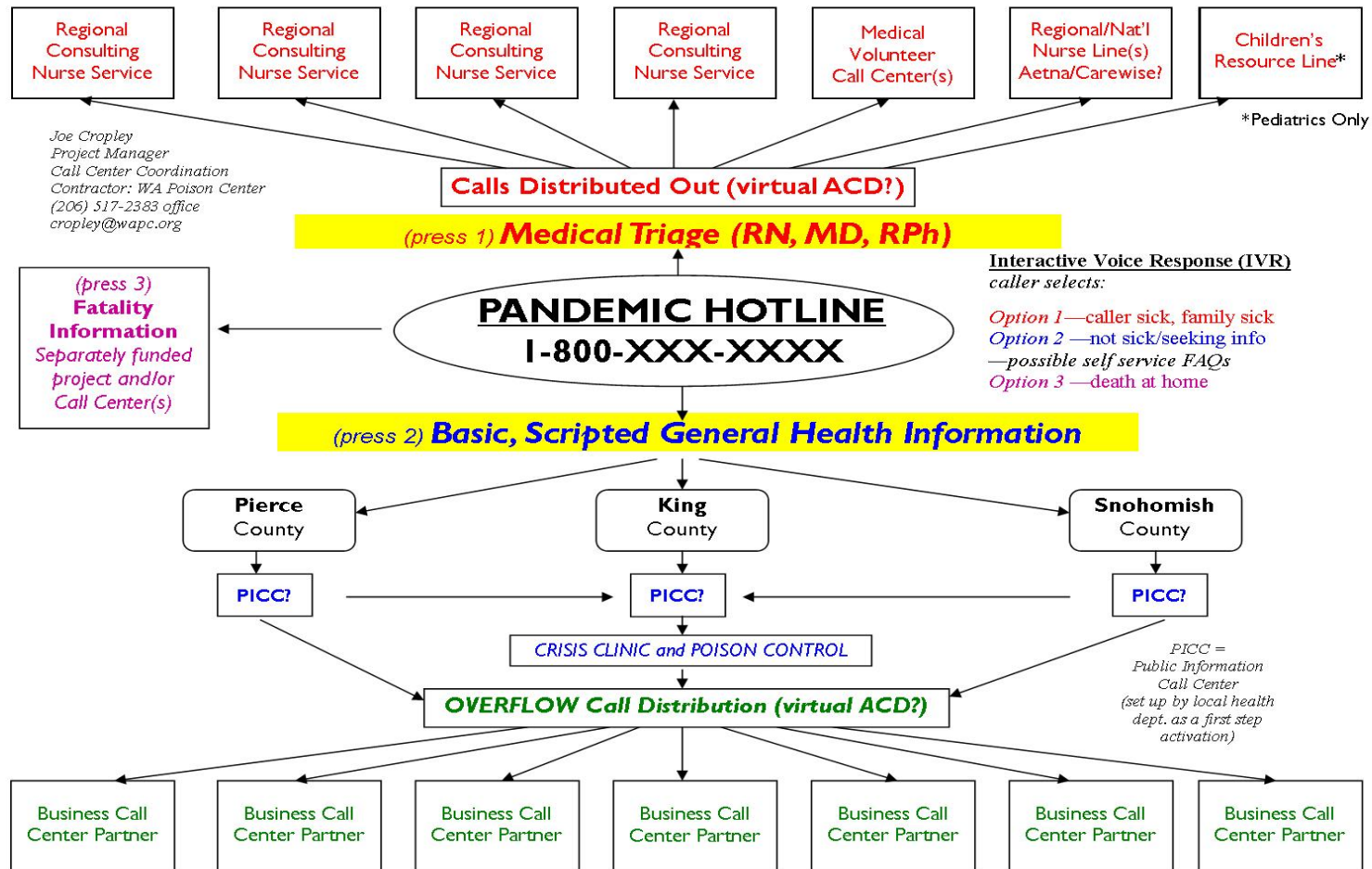


- Call volume driven by event and media
- Adaptation to LHJ and state messages necessary to meet both public health and public needs
- Surveillance
- Sentinel Indicators

Conceptual Model



Regional Public Health Emergency Call Surge Plan - CONCEPTUAL MODEL ONLY



“Connectivity”



- Up to 20 call centers in 3 counties
- 25,000 – 35,000 calls/day projected
- Incorporation of remote (work at home) agents
- Scalable – activated for large scale health emergencies
- Routing/Queuing/Distribution (IVR/ACD)
- User friendly, easy to learn interface
- Reporting and real-time monitoring
- Phone system interoperability



Current Challenges

- STAFFING
- Limited existing 'remote agent' programs
- Many consulting nurses also hold clinical positions
- Different call center phone systems and networks
- Shortage of physical work space

Need for Integrated Software



EC (ECCOH) E-Centaurus - Rocky Mountain Poison and Drug Center - PHES

File Edit Help

Take Calls / Transactions [Close]

Add Find FlUp | S Flup/Nxt6 History | Z Next Previous Prt/Fax/Er Reports Save Save/End Utilities Exit COH 4/5/2004

Caller 6 Bird Pictures

Call Information | 1 Health Info/Other/Transfer Call | 2 Caller's Memo | 3 Patient's Memo | 4

Zip 80422 County GILPIN Source COHELP TR Id CX000508

Type WNV SubType DBR Lang ENG **Interpretr** Translator ID

Caller Name

Memo Note / Append

Maximize

Pre-Defined

Health Info PPFAQ01 Start another call if more than 5 topics used.

Follow-Up // : : Flup Time By Fl/Status Attempts Time Spent

Trans/Date 05/19/2004 Start/Time 11:09:50 End/Time 2.12

Agent AMS1 Patient Outbound

Do Activity

HlthInq Survey Cmpld X-Ref

Next Steps...



- Convene Workgroup to review software/technology
- Address staffing issues in coordination with Alternate Care Facilities planning
- Support cross county collaboration on scripting/triage guidelines
- Develop activation/deactivation plan
- Establish MOU/agreements with potential partners

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