MOVING YOUR TEAM TOWARDS CLINICAL SLEEP HEALTH
INNOVATIVE PROGRAMS THAT FIT THE ROLE

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Conflict of Interest Disclosures

1. I do not have any potential conflicts of interest to disclose, OR

2. I wish to disclose the following potential conflicts of interest:

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<th>Type of Potential Conflict</th>
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<td>Grant/Research Support</td>
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3. The material presented in this lecture has no relationship with any of these potential conflicts, OR

4. This talk presents material that is related to one or more of these potential conflicts, and the following objective references are provided as support for this lecture:
OBJECTIVES

- Identify importance of Empowerment
- Review Delegation vs Empowerment
- Discuss CCSH Role and Core Knowledge
- Identify Possible Billing Codes
- Describe Job Descriptions, Roles and Responsibilities
- Identify changing roles in sleep technology
- Define realities/opportunities in sleep disorders medicine
EMPOWERMENT -- CREATES SUCCESS IN ANY ROLE

- Empowering others means "letting go".
- Making a systematic and sustained effort to give the team knowledge, support, and the opportunity to exercise their power.
- Provides a mutual benefit to everyone.
People are the most underutilized resource in a company.

Technologies, products and structures can be copied by competitors, but people are the company's source of knowledge, and crucial to the company's competitive advantage.

Well educated, coached, and highly motivated people are critical to the development and execution of strategies, for success.
A TALENTED AND EMPOWERED STAFF IS A COMPONENT TO ORGANIZATIONAL SUCCESS

- Putting people ahead of power is not the usual leadership paradigm most of us are accustomed, but it leads to organizational success.

- Example: Sleep Team members deciding shift time, length of shift, whether they take lunch, assisting with patient arrival schedule, etc.
EMPOWERING LEADER

- An empowering leader assumes a leadership and coaching role.

- Provides Team with resources, means and working conditions to accomplish team goals.

- Makes Team Members accountable.
EMPOWERING LEADER

- Effectively focuses the team on shared vision, values, and goals.

- Collects, transforms, and disseminates information to create dialog within the team.
Everyone wants to feel like they are contributing to the vision.

- Develop a Vision Statement and review frequently.

- Focus attention on the Vision, Values and Goals.
OUR VISION IS TO PROVIDE EXCELLENT PATIENT CARE BY ALWAYS BEING PROFESSIONAL, COMPASSIONATE AND RESPECTFUL TO EACH PATIENT AND TO EACH TEAM MEMBER. WITH DEDICATED TEAMWORK AND OUR WILLINGNESS TO CONTINUOUSLY IMPROVE, WE WILL ACHIEVE THE HIGHEST QUALITY OF CARE FOR OUR SLEEP PATIENTS AND THROUGH OUR SERVICE TO THE COMMUNITY.
MANAGERS WORK FOR THEIR STAFF

- When the Team is empowered, it leaves more time for leaders to engage in broad-based thinking, visioning, and nurturing.

- This division of duties allow for strong growth potential.
Encourage Responsibility

Remain in the Center
Not the Head

Ask Productive Questions

Maintain Balance

Manage Boundaries

Attention: Vision, values and Goals

EMPOWERING LEADERS MASTER THE ART OF DELEGATION
Effective delegation is the most powerful skill for a leader.

Delegation provides growth for both the individual and the organization and allows others to feel ownership in the mission.
DELEGATION EMPOWERS

- Gives Team Members the CHOICE of method, making them RESPONSIBLE for results.
DELEGATION TO EMPOWERMENT

1. This is what I need from you.
2. This is how you do it.
3. This is what I want it to look like.
4. This is what you need to do next.
5. I'll give you the last 5%.
6. I own it.
7. Here is where I see this going.
8. Concrete
9. Toe the Company Line.
10. Complete Tasks.
11. No room for other leaders
13. Here's my opinion.

1. What do you need from me?
2. This is YOUR role.
3. This is where we are going.
4. This is how it fits in the big picture.
5. I'll let you contribute the last 5%.
6. You own it.
7. Where do you see this going?
8. Fluid
9. Pushback is encouraged.
10. Generate Results.
11. Room for other leaders
12. Guided by values.
13. What is your opinion?
DELEGATION AIDS IN:

- Succession planning
- Personal development
- Seeking and encouraging promotion
- Enabling others to take on higher responsibilities
CHECKLIST FOR PROPER DELEGATION

- SPECIFIC (be specific about expectations)
- MEASURABLE (provide measurable feedback)
- AGREED (agree on deadlines, methods for checking and controlling)
- REALISTIC (be realistic about capabilities, responsibilities and delegation)
- TIMEBOUND (provide timeline for completing the task)
- ETHICAL (don’t compromise ethics or cut corners to meet deadlines)
- Recorderd (record the steps along the way)
OPPORTUNITIES IN CLINICAL SLEEP HEALTH
WHERE WE ARE NOW, WHERE ARE WE GOING
WHAT IS A CLINICAL SLEEP EDUCATOR?

The CCSH role originated from the American College of Chest Physicians Sleep Apnea Aftercare Consensus Conference in 2000 as a patient-specific focused role in which a care plan is developed to meet the particular needs of the patient.

The educator ensures that necessary services are available, so that the patient is less likely to utilize emergency and inpatient services.
THE SLEEP EDUCATOR...

- Creates an individualized needs assessment
- Uses established principles of adult teaching and learning to create and optimize treatment
- Practices concepts of health behavioral change to enhance individualized patient instruction
- Provides sleep disorder-specific information to aid patient in successful self management
- Considers co-morbidities in all interactions
- Collaborates with other health care professionals to address barriers for successful outcomes
WHY BRPT DEVELOPED THE CCSH Credentials

- To assess the professional competence of healthcare providers and educators who work directly with sleep medicine patients, families and other practitioners to coordinate and manage patient care while improving outcomes.
BRPT VISION FOR THE CREDENTIALED EDUCATOR

- Is knowledgeable in diagnosis, treatment and management of sleep disorders (specifically obstructive sleep apnea)
- Understands communication techniques that enhances education for patients, families and the community
- Comprehends and analyzes test results and utilizes appropriate tools to diagnose, evaluate and monitor sleep disorders
- Assesses patient compliance and comfort with therapy to improve clinical outcomes
BRPT VISION OF THE CREDENTIALED EDUCATOR (CONT.)

- Communicates with other healthcare professionals to report symptoms, persistent treatment issues and barriers to optimal care and management.

- Serves as a resource to the community and other healthcare providers by promoting education on sleep disorders, follow-up and outcomes as well as good sleep hygiene.
- Sleep Physiology
- Respiratory/Cardiac/Neurophysiology
- Sleep Disorders & Diagnostic Criteria
- Sleep Related Comorbidities
- Intervention/Treatment/Therapy
- Chronic Disease Management
- Clinical Guidelines
- Adherence/Compliance Techniques
- Sleep Diagnostic Testing Options
- Sleep and Related Test Results
MAJOR THEMES FOR CCSH CORE KNOWLEDGE

- Written Care Plans
- Learning Theories and Learning Styles
- Outcomes Data and Measures
- Verbal and Written Communication Skills
- Medical Terminology
- Patient Assessment Techniques
- Chart Review and Documentation
- Medications and Over-The-Counter Products
- Patient Confidentiality
- Ethics
- Emergency Procedures
OTHER COMPONENTS OF THE CCSH ROLE

Care Coordination

- Assess co-morbid conditions and addresses them in the context of sleep health

Practices health promotion activities

- Develops and provides individualized sleep health education
- Motivational Enhancement Therapy/Motivational Interviewing
OTHER COMPONENTS OF THE CCSH ROLE

- Patient intake/follow on care
- Assess health literacy
- Critically evaluates patients needs
  - Provide appropriate education and communication tools
  - Applies tenets of patient centered care
  - Applies health behavior models
COMPONENTS OF THE CCSH ROLE

**Assists with management of the patient’s disease (sleep apnea) which:**

- Is population-based and preventive-based
- Has cost savings and outcomes that can be tracked to show improvement
- Ensures that homecare services are appropriately engaged
- Coordinates discharge plans
- Helps to arrange transportation for medical services if required
WHERE DOES THE CCSH ROLE FIT AND WHY IS IT NEEDED?

“At minimum, there are 13 different health care specialties and subspecialties that are involved in diagnosis and treatment of sleep disorders”

- Anesthesiology
- cardiology
- Dentistry
- Endocrinology,
- Immunology
- Neurology
- Nursing
- Nutrition
- Otolaryngology
- Pediatric
- Psychiatry
- Psychology,
- Pulmonology

IOM, 2006
Research the culture of the population when preparing educational materials.

Learn what motivates the community and overcome barriers by addressing participants individually.

Readability of material is critical.

Use effective screening tools, e.g., Berlin, FOSQ, Epworth Sleepiness Scale, StopBang.

Research which sleep disorders and sleep patterns exist in the community.

Discuss improvements in sleep quality with practice of sleep hygiene.

Use “Healthy People 20/20” as a model to align sleep education with community needs.

Arrange community education to focus on practicing good sleep hygiene.
A GOOD PLACE FOR CCSH

- Sleep health education to address disparities in sleep health across age, race, education, and socioeconomic groups.

- Health education and promotion programs to increase awareness on common sleep disorders.

- Sleep health education programs in workplaces to promote better work schedules and motivate managers and workers to adopt strategies to reduce risks to health and safety.

Healthy People 2020
CHRONIC CARE COORDINATION
**Chronic Care Coordination Codes** - 99490

**Chronic Care Management Services:** At least 20 minutes of clinical staff time directed by a physician or other qualified healthcare professional, per calendar month, with the following required elements:

- Multiple (2 or more) chronic conditions expected to last at least 12 months, or until the death of the patient.
- Chronic conditions place the patient at significant risk of death, acute exacerbation/decompensation, or functional decline.
- Establish, implement, revise, or monitor a comprehensive care plan.

Source: AASM
Patient agrees which provider manages the two or more chronic conditions

Care plan must address the chronic conditions
- Conditions include Alzheimer’s/dementia, arthritis, asthma, cancer, COPD, depression, diabetes, heart failure, osteoporosis, etc.

Billing provider must be a physician, CNM, CNS, PA and NP

All face-to-face visits billed separately

Source: AASM
EDUCATION CODES

98960: Education and training for patient self-management by a qualified, nonphysician healthcare professional using a standardized curriculum, face-to-face with the patient (could include caregiver/family) each 30 minutes; individual patient

98961 2-4 patients

98962 5-8 patients

- Designed to teach patients to successfully self-manage disease(s)/illness(es)
- Codes are specifically designed for non-physician providers
- Education is offered only when prescribed by a physician
- Highlighted conditions for these codes are **diabetes and asthma**
- Codes are not paid by Medicare, but are paid by some private payers

Source: AASM
EVALUATION AND MANAGEMENT CODES
99211, 99212, 99213, 99214, 99215

- Codes should generally be used only in a physician office/clinic setting.
- There should always be a physician or nurse practitioner present to bill the code.
- Patients are categorized as either ‘new’ or ‘established’.
- Likely working with established patients. (codes are for established patients only).
- There are various levels of visit code depending on complexity/number of problems.
- When codes are used, must be working under the supervision of a physician for the day and must have a recognized credential. (No specific credential is specified in the coding guidelines, but could include RN, RPSGT, CCSH, and RRT.
- Physician doesn’t always have to see the patient directly for some of these codes.

Source: BRPT: www.brpt.org
Another option for sleep educators and CCSH credential holders is to use generic patient education codes 98960, 98962.

These same codes often used by diabetes educators and asthma educators, but sleep could also qualify. Not necessary to work under a physician.

For best practice, a physician should write an order for allied health to perform the service.

It is important to document qualifications and that 30 minutes or more of time, using a standardized curriculum for instruction was used.

Because these are generic codes, the qualification isn’t specified in the CPT description. It could mean being an RPSGT with a CSE certificate add-on, or a CCSH, or something else entirely.

Try codes with non-government payors until and unless an LCD or NCD specifies which qualifications are appropriate for Medicare patients.

Source: BRPT: www.brpt.org
FILLING THE EDUCATOR ROLE

- Propose Job Description
- Establish the need
- Justify the request
- Discuss the Obstacles
COORDINATOR OF CLINICAL SLEEP HEALTH

- Works with communities to determine health needs
- Creates programs to promote health and wellness
- Shares lessons on health risk prevention
- Connects people with vital health services
- Advocates for individuals and communities in need of health care
Explain request in detail and provide justification for action requested:

This is a new position that addresses a transitioning role in sleep disorders medicine. We have a sleep technologist already performing most of the role as clinical needs have changed over the past few years. There is an international credential associated with this role. Certification in Clinical Sleep Health (CCSH) and this is required for the position. As our sleep centers become more focused on clinical outcomes and reducing readmissions, this role is vital. Over time, the person in this position would oversee the clinical sleep educator positions (to be created). The scope of this role includes the five sleep disorders centers at MPM.

The position will result in improved patient satisfaction, improved treatment compliance and better outcomes for patients. It will also improve physician satisfaction.
SUMMARY JOB DESCRIPTION
COORDINATOR OF CLINICAL SLEEP HEALTH

- The Clinical Sleep Health Coordinator provides continuity of care and outcomes assessment for patients as they transition through the various processes in evaluation and treatment of their sleep disorder.
- The coordinator acts as a liaison between the patient and other health care providers, supports the practice of sleep medicine by communicating with patients, families and the community to educate individuals on sleep disorders, good sleep hygiene, methods to optimize treatment, and to improve and monitor compliance with prescribed treatment, help patients in eliminating barriers to their care in order to maximize their quality of life.
- The coordinator oversees sleep disorders staff participating in any of these roles. Required Certification and Licensure includes CCSH.
JOB REQUIREMENTS
COORDINATOR OF CLINICAL SLEEP HEALTH

- Certification Requirements
- Education Requirements
- Experience needs
- Specific Skills Requirements
- Job Specific Functions

**Experience:** 5 Years **Specialty:** Sleep Disorders

- Customer service skills
- Written and verbal communication skills
- Interpersonal skills
- Ability to delegate
- Ability to work independently
- Ability to work with a team
- Critical thinking skills
- Organizational skills
- Clerical skills
- Computer skills appropriate to the position
- Knowledge of regulatory standards appropriate to position
- Management skills
- Medical Terminology
**JOB FUNCTIONS**

**COORDINATOR OF CLINICAL SLEEP HEALTH**

**Job Specific Functions**
- Develops individualized management plans including appropriate follow-up
- Measures and documents patient's understanding of information
- Evaluates effectiveness of programs designed and developed
- Assists departments in identifying quality improvement opportunities
- Meets project deadlines
- Performs other duties as assigned

**Category: Patient Support**
- Communicates effectively and works collaboratively with physicians and other healthcare professionals to report new or continued symptoms, persistent treatment challenges, or barriers to optimal care and management
- Ensures that ongoing support and reinforcement is provided to sleep disorders patients
JOB FUNCTIONS:
COORDINATOR OF CLINICAL SLEEP HEALTH

- **Category: Patient Support**
  - Measures and documents patients' understanding of information taught through written documentation, verbal demonstration and teach-back method as indicated
  - Provides patient education related to sleep disorders, sleep study procedures and co-morbid disease processes
  - Resolves patient conflicts

- **Category: Education**
  - Serves as a community speaker on sleep disorders topics when requested
  - Serves as a resource to the community and other health care providers by promoting education on sleep disorders, treatment, follow-up and outcomes, as well as good sleep hygiene
JOB FUNCTIONS:
COORDINATOR OF CLINICAL SLEEP HEALTH

- **Category: Education**
  - Manages the A.W.A.K.E. patient support group and arranges the educational speakers and room requirements for the monthly meetings
  - Participates in community and corporate health fairs to screen and educate about sleep disorders

- **Category: Clinical Duties**
  - Makes referrals to appropriate health care providers per established protocols
  - Performs PAP desensitization and PAP naps when indicated, including use of interface alternatives when appropriate
  - Maintains current knowledge of DME equipment, including therapeutic devices and accessories
JOB FUNCTIONS:
COORDINATOR OF CLINICAL SLEEP HEALTH

- **Category: Clinical Duties**
  - Assists with patient set-ups for unattended studies (home sleep studies)
  - Downloads and reviews data; generates reports for physician review
  - Assists with performance of patient set-up and procedures for actigraphy studies

- **Category: Clinical Practice**
  - Understands communication techniques for teaching and the principles of learning to enhance education for patients, families and the community
  - Understands and can explain/calculate sleep indices, histogram and sleep stages
JOB FUNCTIONS: COORDINATOR OF CLINICAL SLEEP HEALTH

- Category: Clinical Practice
  - Knows diagnosis and management of major sleep disorders, with a focus on obstructive sleep apnea (OSA)
  - Assesses comfort with treatment to improve clinical patient compliance and outcomes; sleep disorder specific information; co-morbidity information

- Category: Clinical Practice
  - Assesses data reflective of the patient’s status and appropriately interpret information relative to age-specific needs
  - Assists with coordination of quarterly sleep medical directors’ meetings
JOB FUNCTIONS:
COORDINATOR OF CLINICAL SLEEP HEALTH

▪ Category: Clinical Practice
  ▪ Attends professional education and conferences as budget allows
  ▪ Assists in training clinical sleep educators and with CCHS credentialing as required
  ▪ Provides oversight of other clinical sleep health staff

▪ Category: Program Management
  ▪ Handles patient calls to assist in resolving PAP interface, accessory and machine issues/technical problems/compliance issues
  ▪ Coordinates and participates as needed with weekly patient PAP clinics
  ▪ Provides complete, thorough and timely documentation of all patient interactions/communications in the EMR
JOB FUNCTIONS:
COORDINATOR OF CLINICAL SLEEP HEALTH

- Category: Program Management
  - Provides follow-up to patients throughout process of receiving PAP equipment or other treatment device
  - Reviews data from PAP downloads; makes recommendations to help resolve compliance issues and technical issues related to PAP interface
JOB DESCRIPTION CLINICAL SLEEP EDUCATOR
Position Justification
Clinical Sleep Educator

- Position addresses a transitioning role in sleep disorders technology.
- Polysomnographic technologists are already performing many of the tasks defined in this role as clinical needs have changed over the past few years.
- There is a Clinical Sleep Health Coordinator position at ___ which oversees tasks associated with this role.
- A Certification in Clinical Sleep Health is required for the position (CCSH).
- As our sleep centers become more focused on clinical outcomes and involved in reducing hospital readmissions, clinical sleep educators are more vital than ever.
- The scope of this role includes all sleep centers at ___ and may also include other sleep centers within the organization.
**DESCRIPTION OF THE CLINICAL SLEEP EDUCATOR**

- **Job Title:** Clinical sleep Educator
- **Scope of Responsibility:** Monitors and Educates Patients in Clinical Sleep Health

The Clinical Sleep Educator (CSE) provides education to patients to assist them with management of their sleep disorders, with special emphasis on sleep apnea. The CSE acts as a supportive non-physician source for successful disease management, community and patient education and promotes the standard of care needed for patients and their families. The CSE collaborates with physicians, patients and families in delivery of services and management of sleep disorders and acts as the liaison and point of contact to resolve patient issues, problems and treatments. The role includes educating individuals on sleep disorders, good sleep hygiene, methods to optimize treatment to improve and monitor compliance with prescribed treatment and help patients in eliminating barriers to their care to improve their quality of life.
POSITION REQUIREMENTS
CLINICAL SLEEP EDUCATOR

- Certification Requirements
- Education Requirements
- Experience needs
- Specific Skills Requirements
- Job Specific Functions
POSITION REQUIREMENTS
CLINICAL SLEEP EDUCATOR

**Certification & Licensure**
- Requirement Certification / License Specialization
- Required Reference summary for details Certification
- Required RPSGT (Polysomnographic)
- Or RRT (Respiratory Therapy) Or LPN (Licensed Practical Nurse)

**Education**
- Required High School or Equivalent
- Preferred Associate's Neurology
- Or Associate's Polysomnographic
- Or Associate's Respiratory Therapy

**Experience**
- Required 5 years Reference summary for details

**Job Specific Functions**
- Develops individualized management plans including appropriate follow-up, measures and documents patient's understanding of information
- Assists departments in identifying quality improvement opportunities
- Meets project deadlines
JOB SPECIFIC SKILL REQUIREMENTS
CLINICAL SLEEP EDUCATOR

- **Required Specific Skills**
  - Delegation skills
  - Work independently
  - Work with a team
  - Administrative and clerical skills
  - Computer skills appropriate to position
  - Critical thinking skills
  - Customer service skills
  - Interpersonal skills

- **Required Specific Skills**
  - Knowledge of regulatory standards appropriate to position
  - Medical terminology use and understanding
  - Organizational skills
  - Presentation skills
  - Work with diverse personalities and interact with all levels of the organization
  - Written and verbal communication skills
JOB SPECIFIC SKILL REQUIREMENTS
CLINICAL SLEEP EDUCATOR

▪ Patient Support

▪ Communicates effectively and works collaboratively with physicians and other health care professionals to report new or continued symptoms, persistent treatment challenges, or barriers to optimal care and management
▪ Ensures that ongoing support and reinforcement is provided to sleep disorders patients

▪ Patient Support

▪ Provides patient education related to sleep disorders, sleep study procedures and co-morbid disease processes
▪ Resolves patient conflicts
Clinical Duties

- Performs PAP desensitization and PAP naps when indicated, including use of interface alternatives when appropriate
- Maintains current knowledge of DME equipment, including therapeutic devices and accessories
- Assists with patient set-ups for unattended studies (home sleep studies); downloads and reviews data; generates reports for physician review
- Assists with making referrals to appropriate healthcare providers
- Serves as a liaison between the patient, physician and DME company, working to coordinate appointments, optimize care and promote compliance and positive outcomes
 JOB SPECIFIC SKILL REQUIREMENTS
CLINICAL SLEEP EDUCATOR

▪ Clinical Practice

▪ Understands communication techniques for teaching and the principles of learning to enhance education for patients, families and the community
▪ Understands and can explain/calculate sleep indices, histogram and sleep stages
▪ Knows diagnosis and management of major sleep disorders, with a focus on obstructive sleep apnea (OSA)
▪ Assesses patient compliance and comfort with treatment to improve clinical outcomes; sleep disorder specific information; co-morbidity information
▪ Assesses data reflective of the patient’s status and appropriately interpret information relative to age-specific needs
▪ Attends professional education and conferences as budget allows
▪ Assists in training clinical sleep educators and with CCHS credentialing as required
JOB SPECIFIC SKILL REQUIREMENTS
CLINICAL SLEEP EDUCATOR

- Program Management
  - Handles patient calls to assist in resolving PAP interface, accessory and machine issues/technical problems/compliance issues
  - Provides complete, thorough and timely documentation of all patient interactions/communications in the EMR
**JOB SPECIFIC SKILL REQUIREMENTS**

**CLINICAL SLEEP EDUCATOR**

- **Program Management**
  - Provides follow-up to patients throughout the process of receiving PAP equipment or other treatment device
  - Reviews data from PAP downloads; makes recommendations to help resolve compliance issues and technical issues related to PAP interface
  - Assists in evaluating the effectiveness of programs designed and developed

- **Education**
  - Serves as a community speaker on sleep disorders topics when requested
  - Participates in community and corporate health fairs to screen and educate about sleep disorders
  - Serves as a resource to the community and other health care providers by promoting education on sleep disorders, treatment, follow-up and outcomes, as well as good sleep hygiene
  - Assists with the A.W.A.K.E. patient support group and helps to arrange the educational speakers and room requirements for the monthly meetings
  - Assists with management of inpatient and other sleep disorder screening programs, providing necessary education
Sleep Technologists in Perioperative Settings for Sleep Apnea Patients in Hospitals

Sleep apnea can be dangerous...
ROLES IN PERIOPERATIVE SETTING

- Sleep Educator
- Educator for Nurses
- Educator for Hospital Staff/Departments
- Physician Educator
- Physician Extender
- PAP Compliance
- Community Educator
HOW WE INCORPORATED SLEEP EDUCATORS IN THE PERIOPERATIVE PROGRAM
PATT administers and grades STOP BANG questionnaire for **all** surgery patients.

PATT writes STOP BANG score on sticker and places sticker on front of patient’s skeleton chart.

PATT places patient’s ID sticker on STOP BANG form, sends to Health Information Management (HIM) and stamps sent.

PATT adds copy of **all** scored STOP BANG forms in the Sleep Center Educator inbox.

STOP BANG score 5 or greater:

- **Pathway 1**: In person interview
- **Pathway 2**: Phone screening
- **Pathway 3**: Refuses home sleep test
PATHWAY 1: PATT IN PERSON INTERVIEW

PATT SENDS PATIENT TO CERTIFIED CLINICAL SLEEP EDUCATOR WITH COPY OF STOP BANG FORM

CERTIFIED SLEEP EDUCATOR

EDUCATES PATIENT ON SCREENING RESULTS

INITIALIZES HOME SLEEP TESTING EQUIPMENT

INSTRUCTS PATIENT ON EQUIPMENT USE

SCHEDULES RETURN OF EQUIPMENT

DOWNLOADS AND VERIFIES RESULTS

EDUCATES PATIENT ON RESULTS

MAINTAINS AND UPDATES DATABASE

PROVIDES HST REPORT TO “HIM”
PATHWAY 2: PATT PHONE SCREENING

PATT ADDS COPY OF ALL SCORED STOP BANG FORMS IN THE SLEEP CENTER EDUCATOR’S INBOX

CERTIFIED SLEEP EDUCATOR

PICKS UP STOP BANGS IN PATT

CALLS PATIENT AND OFFERS HOME SLEEP TEST

ARRANGES EQUIPMENT PICKUP

EDUCATES PATIENT ON EQUIPMENT USE

SCHEDULES EQUIPMENT RETURN

DOWNLOADS AND VERIFIES RESULTS

EDUCATES PATIENT ON RESULTS

MAINTAINS AND UPDATES DATABASE

PROVIDES HST REPORT TO “HIM”
PATHWAY 3: PATIENT REFUSES HOME SLEEP TEST

CERTIFIED SLEEP EDUCATOR

DOCUMENTS PATIENT’S REFUSAL OF HOME SLEEP TEST

PLACES STOP BANG FORM IN DATABASE

VERIFIES PATIENT’S PCP
SLEEP APNEA PERIOPERATIVE OSA IDENTIFICATION & MANAGEMENT - PHASE III – DISCHARGE PLANNING

PULMONOLOGIST OR SLEEP PHYSICIAN ORDERS IN HOSPITAL APAP, ORDERS LOANER APAP AT DISCHARGE AND ADD INSTRUCTIONS IN NARRATIVE FOR DME (APAP LOANER)

CTC SEEKS ORDER ON TASK LIST AND DELIVERS HOME APAP UNIT TO PATIENT

CTC NOTIFIES CLINICAL SLEEP EDUCATOR

CLINICAL SLEEP EDUCATOR (CSE)

TRACKS PATIENT FOR 24-HOUR HOLD

VISITS INPATIENTS

CALLS OUTPATIENTS

EDUCATES PATIENT ON 8 WEEKS USE OF LOANER

FOLLOW UP CALLS: 3 DAYS, 2 WEEKS, 4 WEEKS, 6 WEEKS AND 7 WEEKS

SENDS LETTER & COPY OF STOP BANG TO PCP FOR FOLLOW UP AND SLEEP STUDY ORDER

PATIENT DISCHARGED WITH APAP

BAYCARE HOMECARE

TRACKS APAP MACHINE IN 7-10 DAYS

PICKS UP MACHINE IN 8 WEEKS

CTC NOTIFIES RESPIRATORY THERAPY TO EDUCATE PATIENT

PHYSICIAN FOLLOWS UP WITH PATIENT IN 4-6 WEEKS
**STOP BANG Score ≥5**

- **PATT**
  - Administers STOPBANG QUESTIONNAIRE
  - Scores STOP BANG and Places Sticker on Chart
  - Place copy of STOPBANG in Sleep Center Inbox
  - Provide Copy of STOPBANG to HIM to scan into EMR

- **PATT Notifies Sleep Center**
  - Offers Home Sleep Test to Patient
    - YES: Educates Patient, Manages HST Equipment, Scores Data and Generates Reports, Provides Report to HIM to Scan to EMR, Notifies PCP of Apnea Screening
    - PT. REFUSES: Documents and Notifies PCP of Screening Results

- **Documents and Notifies PCP of Screening Results**

- **Surgery**
  - PACU

- **Post-Op Complications Related to Sleep Apnea**
  - NO: Normal Recovery, Discharge to Home or To Floor
  - YES: Pulmonary consult from Anesthesia if needed: Work on adding this to patient safety—if IV TYLENOL available, apnea patients may not require additional monitoring (P & T Committee)
OTHER ROLES IN THE HOSPITAL FOR SLEEP EDUCATORS

➢ Teaching in pre-surgery classes:
  ➢ Hip and Knee Class (Ortho patients' high risk)
  ➢ Other elective surgery classes

➢ Educator to other departments:
  ➢ Cardiac Rehab
  ➢ Bariatric
  ➢ Diabetes
ROLES IN THE HOSPITAL FOR SLEEP EDUCATORS

- Coordinate the Home Sleep Testing Home Delivery Program
- Coordinate Community Education Programs
  - Health Fairs
  - Employee Education
  - Bariatric Program Education
  - Diabetes Education
- Coordinate and Training for Inspire Team
- PAP Clinic
- Awake Support Group
- PAP NAPS
- PAP Followups
Sleep disorders cost employers $60 billion in lost productivity, industrial accidents and medical expenses.

Employees with OSA have significantly more absenteeism and higher rates of work disability.

Employers are responsible for providing education to employees.
Track outcomes from health fairs, corporate programs, internal program

Maintain a strong web presence:
- 7-minute Health Risk Assessment (HRA) for Sleep
- Survey feedback
- Follow up on employees sleep health outcomes
OTHER ROLES IN CLINICAL SLEEP HEALTH
PATIENT CARE COORDINATORS/NAVIGATORS

- New employees are needed who can take on these additional responsibilities.
- **Care coordinators** and **patient navigators** are a natural solution.
- They are a right fit because they are usually a more cost-efficient option than hiring non-physician providers (e.g. PAs, NPs).
WHO WILL GET HIRED?

▪ A recent job posting for a **registered nurse care coordinator** at Ohio State University Medical Center lists the maximum salary at $44,000.

▪ Care coordinators may be less expensive to employ, but that doesn’t mean they won’t be able to handle the responsibilities of the job.

▪ Nurse care coordinators are often highly trained in care coordination, communication, and collaboration and will be very expensive.
TECHNICAL ROLES

- The role of a patient navigator or nurse navigator may differ slightly from that of a patient care coordinator.

- Navigators are a good option for chronic care settings or larger integrated health networks, because they help patients “navigate” the healthcare system.

- They are less effective in outpatient settings and in physician practices.
Sleep Technologists in Navigator Roles??

- Nurse navigators make appointments for patients, explain treatment options and expand on their medical conditions and provide advice and support to patients.

- Navigators are usually Registered Nurses, but other individuals, such as social workers, are sometimes employed in this role.

- A program in Colorado offers social workers, nurses, and community health workers training in patient navigating --- Sleep Technologist Role???
JOE POSTINGS FOR SLEEP TECHNOLOGISTS

- Clinical Sleep Educator/HME - Full Time Days
- Hourly Rate: $25.00 - $35.00
- Type: Full Time - Experienced
- Sector: Independent Medical / Diagnostic Laboratory
- Required Education: 2 Year Degree
This is a full time career opportunity at an AASM accredited sleep center. The position is for a **Clinical Sleep Educator**. Basic job description includes direct patient care, mask fittings, therapy instruction, PAP therapy set up and acclimation training.

We plan to move this position into a **physician extender role**. This shift may rotate from 7:00am-4:00pm Monday-Friday to 8:00am-5:00pm Monday-Friday.

This position requires FIVE YEARS MINIMUM SLEEP MEDICINE EXPERIENCE, and one of the following credentials: RRT, CRT, RPSGT, or RST. Computer/digital literacy, professional communication skills, and a positive attitude are essential.
The supervisor, patient care coordinator is accountable for overseeing the day-to-day operations of the care coordination of sleep apnea patients.

The position collaborates with the care coordination staff, managers, physicians, hospital staff and other healthcare staff regarding care management issues identified through patient assessment or through the multidisciplinary team meetings.
JOB POSTING: SUPERVISOR PATIENT CARE COORDINATOR

• Successful candidate must have a hold licensing in the state with **five years** of clinical experience or combination of clinical experience and previous training and certification in sleep disorders patients or related disciplines.

• The preferred candidate should be Bi-lingual Spanish/English. Some in-state travel required.

• Salary range: $28-$35 per hour depending on experience level.
Clinical Sleep Educator in Saint Joseph, MO

Average Clinical Sleep Educator salaries for job postings in Saint Joseph, MO are 13% higher than average Clinical Sleep Educator salaries for job postings nationwide.
What happens when sleep disorders medicine moves from sleep centers to Sleep Medicine Practices (AASM accreditation now available)?

What options are left for sleep technologists when these practices look at hiring a more educated and more advanced skilled professional?

Sleep Technologists need to be more educated than in the past.
CONSIDERATIONS

• The CCSH credential offers pathways to other allied sleep professionals who may not be currently practicing sleep medicine.
• This practice may preclude a sleep technologist from getting hired if a more highly educated individual can fill the role. *(Kaiser Permanente Practice)*
• Are salaries commensurate with current salary levels for RPSG Ts?
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