Ratios

CP3 Toolkit: Building the Care Team

The information below describes the various elements of medical teams, IT tools, and services used as a part of a team-based care approach. It is adapted from a September 21, 2016 presentation by the Multnomah County Health Department at CP3’s learning session two. Download the complete presentation.

Staffing Ratios
- Providers (1.6 to 2.0 FTE)
- RN (1.0 FTE)
- LVN (1.0 FTE)
- Medical Assistants (2.0 FTE)
- Behavioral Health Provider (0.5 FTE)
- Community Health Worker/Navigator (0.5 FTE)
- Scribe (1.0 FTE)
- Team Assistant (clerical support) (1.0 FTE)

additional Care Team Roles:
- Clinical Pharmacist: Embedded in clinical teams to focus on hospital follow ups, complicated medication regimes, consultative role
- Dedicated Preventive Care Medical Assistants: Focus on proactive outreach to established patients with health care gaps
- Lab Staff
- Specialty Care Providers: Women’s health, Acupuncture, Orthopedics, Rheumatology, Neurology
- Dental Hygienist: Focus on prenatal patients and Well-Child Visits

Centralized Services
- Central Call Center
- Eligibility Services
- Referrals
- Health Information Services
- Nutritional Staff

Information Technology
- EHR Training and Support Staff
- Data and Analytics
- Super Users
- IT Support
New Types of Service Delivery

• Medical Providers
  – Telephone and patient portal visits
  – Opportunities to increase group visits
  – Orchestrates patient care

• RN Staff
  – Protocol driven office visits
  – Increase direct patient care
  – High level telephone advice
  – Case management of high-risk patients

• LVN
  – Telephone advice by protocol
  – Nurse visits to scope of practice
  – Case management of low-risk patients