

How Different Hospital Departments Collaborated to Create an Outpatient-Friendly “One-Stop” Experience



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The Scenario



- Outpatients utilize our Laboratory, Imaging and Pharmacy services, typically receiving care from all 3 during a single visit.
- During a visit, patients FEEL stuck in silos:
 - 1st stop is Registration (queuing up)
 - 2nd stop is Laboratory (queued up again)
 - 3rd stop is Imaging (queued up again)
 - 4th stop is Pharmacy (queued up again)
- Individual departments didn't “see” this and in fact were reporting good turnaround times for their individual services.

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Key Objectives for FY11



- Care is delivered in the appropriate setting and is ***coordinated across the entire care continuum***
- Centers of Excellence focused on multiple sites and services
- Multi-disciplinary teams provide patient-centered care where the patient is known and their needs are understood
- Aligned systems of care

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Setting the Stage



- Laboratory:
 - averages 20 patients an hour
 - open 7am-7pm
 - 25% of these also have Imaging appointments
 - waiting room seats 15 comfortably
- Imaging:
 - averages 30 patients an hour (bring family members)
 - open 8am-5pm
 - 25% of these also have Pharmacy needs
 - waiting room seats 50 comfortably
- Retail Pharmacy:
 - not within walking distance of Lab or Imaging
 - seating for 5 comfortably

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So What, Now What?



- Green Belt sensing session:
 - *Review Executive challenge*
 - *Discuss initial team membership and roles*
 - *Assign Process Ownership*
 - *Discuss initial project scope and non-negotiables*
 - *Discuss outcome expectations*
 - *Review 'before' data*
 - *Discuss tentative project timelines*

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Executive Expectation



- Treat our patients as if they've come in for a single encounter
 - Think out of the box and revise our process flows so they appear as "one-stop" for the patient
 - Engage staff to ensure avoidance of comments like:
 - "I am the only one here today"
 - "We are short staffed"
 - Set metrics to measure improvements
- Non-negotiables = can not hire additional staff or do any construction
- Report-out to the Strategy & Operations Council

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LEAN Team Training Event

Welcome / Review of activities to date

8 AM

A-to-Z Strategies for Collaborative Teams

LEAN Tools: Value & Waste (Exercise 1)

(BREAK)

LEAN Tools: Flow & 6S (Exercise 2)

LEAN Tools: Takt, Level Loading, Set-Up (Exercise 3)

(LUNCH)

LEAN Tools: Controls, Error-Proofing, Pull (Exercise 4)

LEAN Tools: Standard Work & Metrics

(BREAK)

LEAN Tools: For Everyday Life

LEAN Tools: Quiz Game

Team Briefing & Expectations

5 PM

Carol Kinsey Goman, Ph.D

A-to-Z collaboration:



ACKNOWLEDGE collaborative contributors

Focus on the **CUSTOMER**

Harness **DIVERSITY** by varying the team's skill level and knowledge

FOCUS on failure

HUMBLE egos and hoarders

Create **INOVATION** through cross-pollination of ideas

MIX-it-up with personnel in various jobs/departments

Insist on **OPEN** and transparent communication

Ask **QUESTIONS** like: What information/knowledge do we need? Who are the experts? Who in the organization has done this before? Who else will need to know what we learn? How do we plan to share/hand off what we learn?

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Project Members

Executive: President

Sponsors: Executive VP, CFO, VP Lab

LEAN Team Member Departments:

Green Belt Facilitator

Registration (Process Owner)

Registration Supervisor

Imaging Director (Process Owner)

Imaging Tech

Outpatient Laboratory (Process Owner)

Lead Phlebotomist

Nuclear Medicine Tech

Non-Invasive Cardiology Clerk

Patient Relations Director



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Remember...

- Non-negotiable

Can not hire additional staff

Can not perform any construction



- Eliminate service gaps

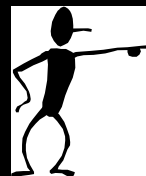
Departmental silos



- Remove negative patient perception

Repeatedly redirected and requeued

"Multiple-stop-encounters"



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The Challenge

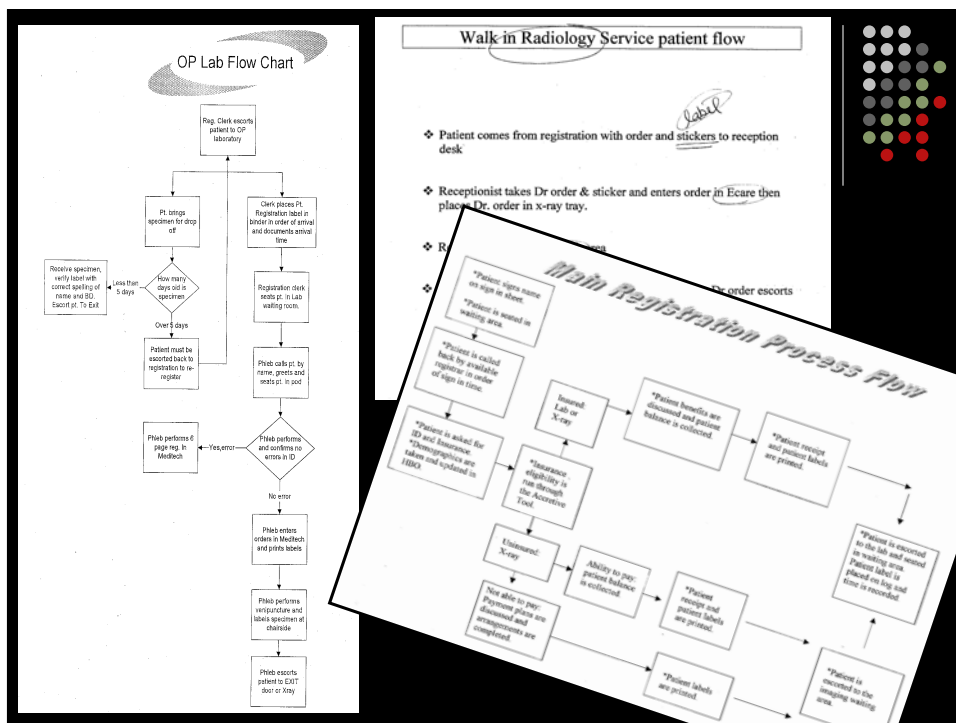
- Promote staff efficiency
- Minimize patient travel
- Effectively utilize available real estate
- Remove redundant activities
- Combine functional areas

Seriously?

YEAH, RIGHT !!!



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Do the GEMBA walk...



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The Way We Were



- Main Registration and Financial Clearance includes:
- direct hospital admits
 - walk-in Lab
 - walk-in Imaging
- Central Scheduling includes:
- pre-admissions
 - pre-scheduled procedures

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The Way We Were



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Pre-Event Patient Wait Times by Day of the Week



	Mon	Tue	Wed	Thu	Fri
Registration	38	30	27	39	21
Lab	19	18	12	11	14
Imaging	27	18	34	28	33
Encounter Total WT	84	66	73	78	68

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Pre-Event Lab Wait Times by Hour

	Mon	Tue	Wed	Thur	Fri
7a-9a	38	30	17	14	21
9a-11a	19	33	24	9	14
11a-1p	27	18	34	28	33
1p-3p	30	16	15	23	40
3p-5p	29	17	34	12	46
5p-7p	19	15	15	23	14

NOTE: Registration and Imaging also evaluated their hours of operation versus wait times

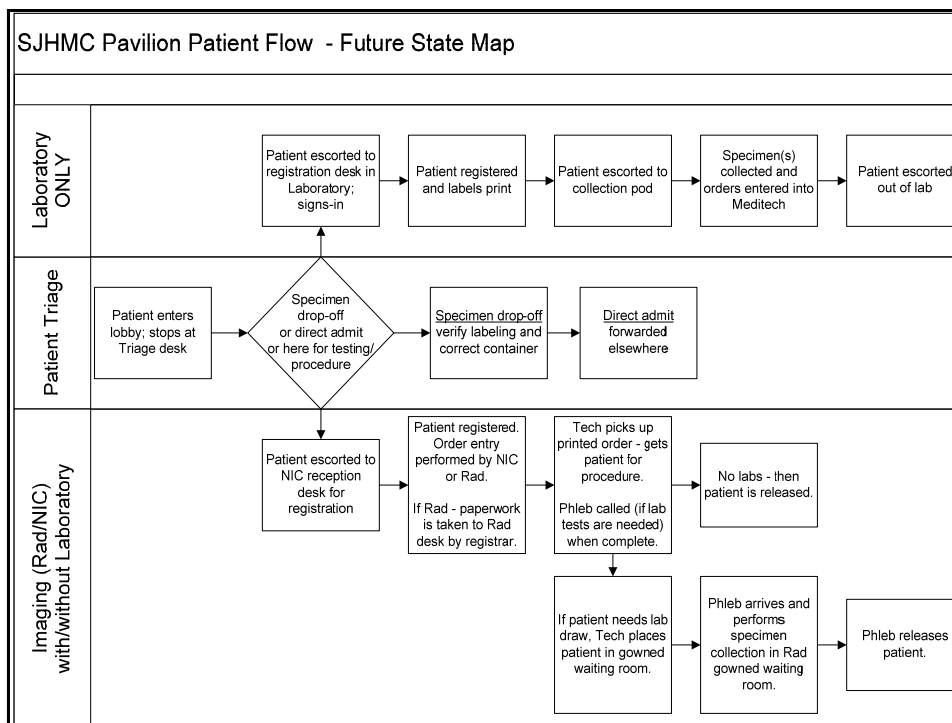


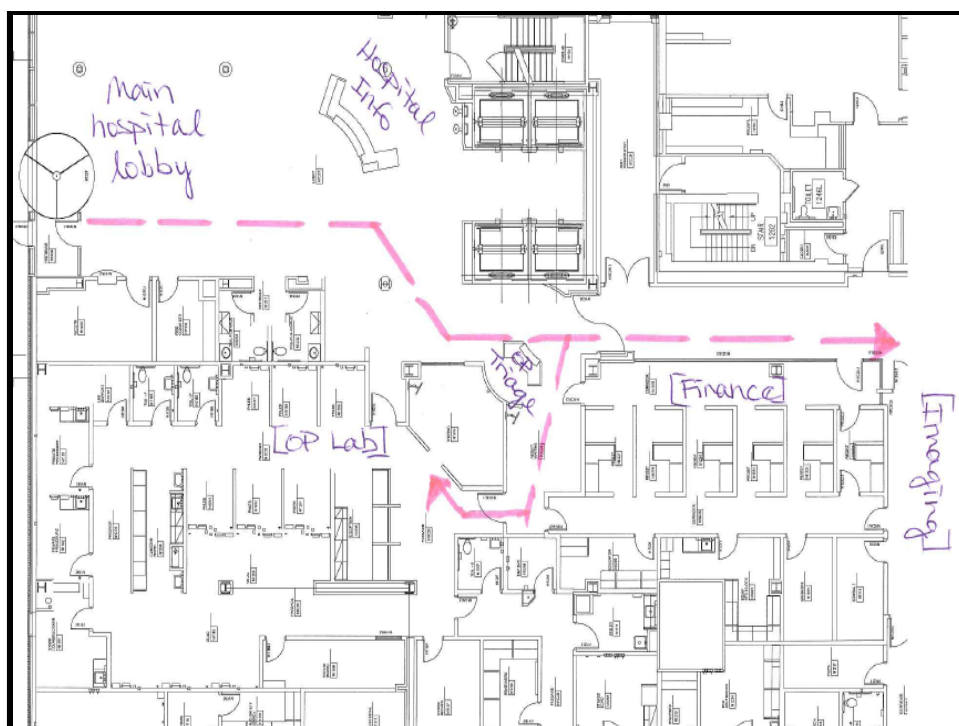
A-to-Z with Senior Leadership



- Encourage out-meeting brainstorming for ideas to meet future state:
 - collaboration of real estate
 - staff efficiencies
 - Disney-style patient hand-offs
 - Foyer Triage
 - Single 'waiting room'
 - 'Roving' phlebotomy
 - Isolated financial counsel
 - Pharmacy scripts must scan/email

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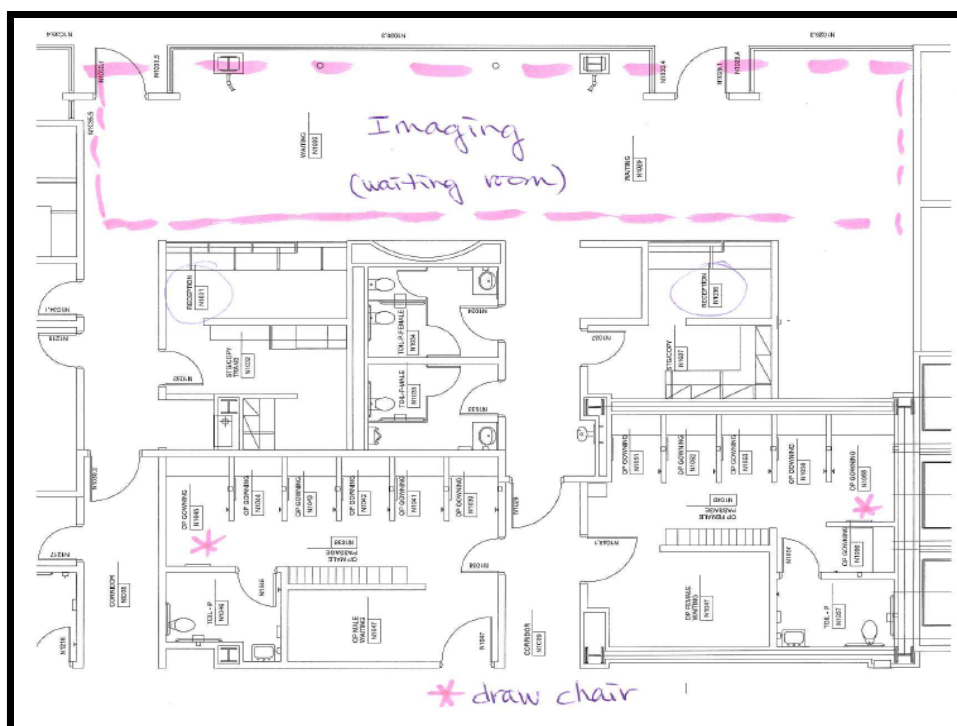


Out-of-the-box NOW

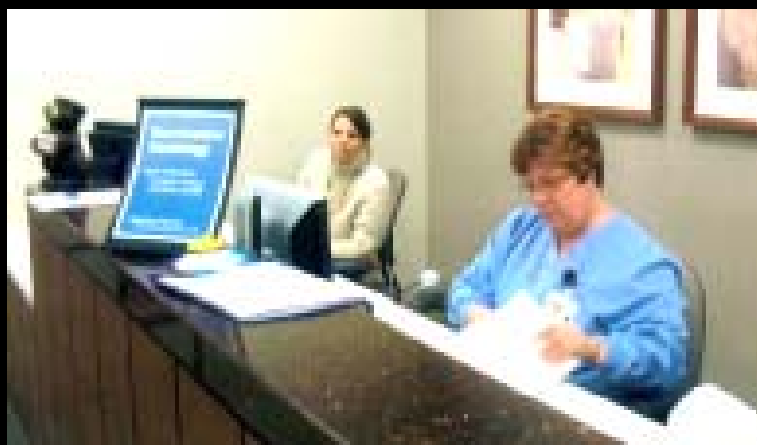


Lobby OP Triage



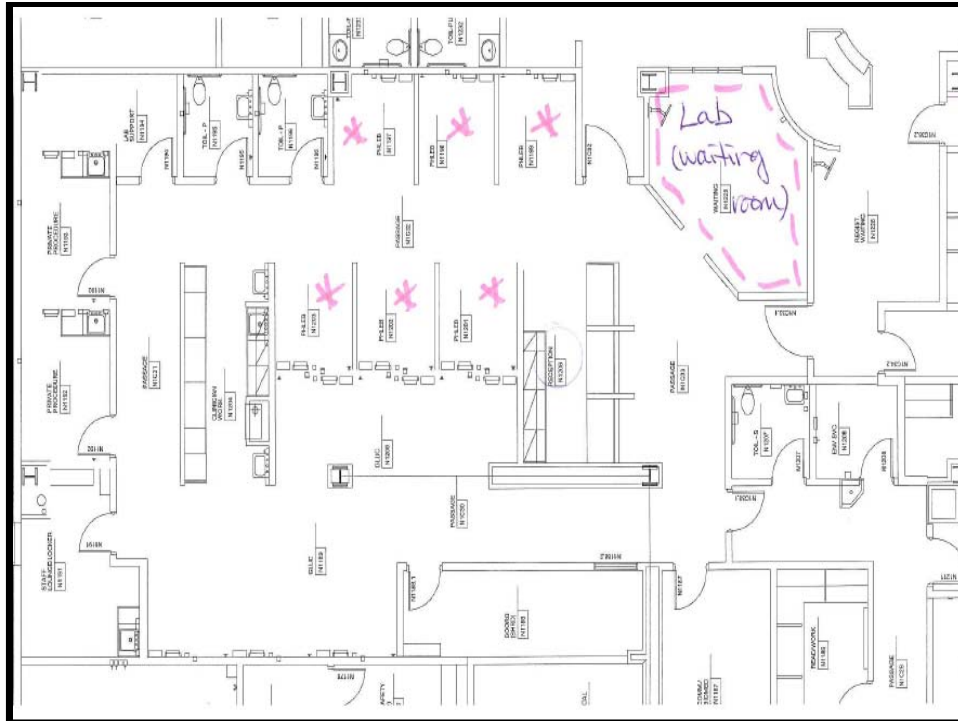


Out-of-the-box NOW



Point of Service
Registration - NIC

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Out-of-the-box NOW



**Point of Service
Registration - Lab**

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Out-of-the-box NOW



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Out-of-the-box NOW

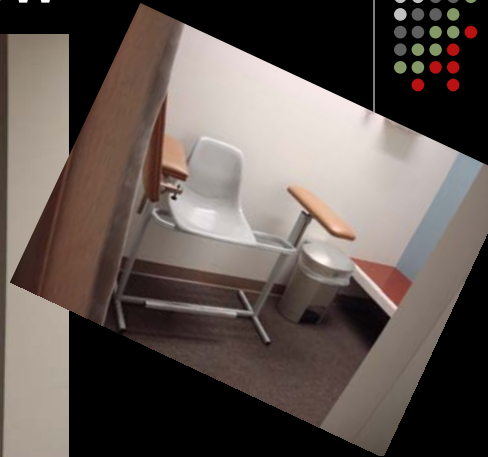


This is the prescription that needs to be emailed to Pharmacy.

I gotta go...patient ready for blood draw in Imaging...back in a flash!!

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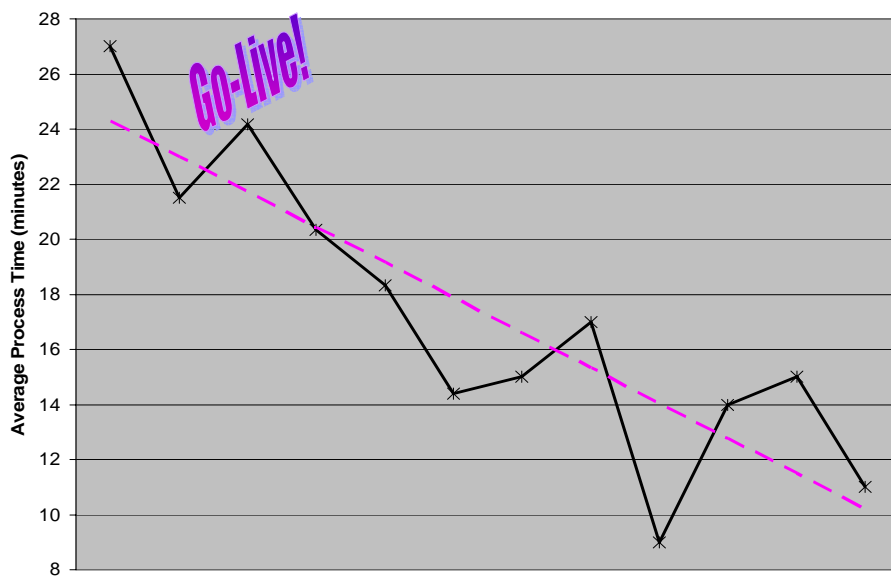
Out-of-the-box NOW



Point of Service
Imaging Changing
Room – Phlebotomy
Chair

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Patient "one-stop" Experience



Comments from Our Patients:



- “It used to take all day to get lab work done.”
- “I’m done? That was it? What about all the rest I used to have to do?”
- “Thank you for finally fixing this.”
- “This is nice, less walking and waiting.”
- “I love the convenience of coming to one place. In and out is what a busy mother needs.”
- “BIG Improvement from the old way. Thank you!”
- “Clinic was easy to find and registration was quick.”
- “You guys did an amazing job!”
- “Very speedy and professional.”
- “Flowed smoothly from sign-in to draw-n-gone.”

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What still needs to be done...



- Patient-friendly signage
- WOWs for Imaging
- Deployment of this project’s outcome to our other outpatient draw sites
- Team members deployed to coach other multi-departmental pre-event groups
- Coaching / mentoring to encourage elimination of all departmental silos
- Develop transportation options to Pharmacy

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**Everybody...
let's do the GEMBA walk!**

