

MHA Green Belt Lean Six Sigma Project Summary

INITIATIVE TITLE: Outpatient Infusion Clinic: Scheduling Efficiencies

ORGANIZATION NAME: Phelps Health

ELECTRONIC MED RECORD: EPIC

PARTICIPANT / CONTACT INFORMATION

Team Leader Name: Katherine Ramsay	Title: LEAN/Quality Improvement Specialist	Preferred contact-type email address/phone#
Katherine Ramsay	LEAN/Quality Improvement Specialist	kramsay@phelpshealth.org

DEFINE – Problem Statement & Goal

The Outpatient Infusion clinic has shown key concerns regarding efficiency. It appears as though the number of patients scheduled and served in this clinic decreased between 2020 and 2021. Despite this apparent decrease, it seems that the time required to complete tasks for these patients increased during the same time period.

Improve scheduling efficiencies by 10% DPMO, sigma score by December 31, 2022.

DEFINE - Initiative Scope

Time efficiency and optimization of clinic practices. We were approached by the medical director in charge of the MO 406 about certain trends that had been brought to her attention. She outlined her problems, and asked for our help improving the current processes and to make the function of this clinic more efficient in order to maximize the number of patients that could receive services.

DEFINE -BIG Y PROJECT CTQ TREE Big Y **Customer Need** (Process Output) Optimization of clinic practices; i.e # of times infusion Target scheduling chairs are not filled **Defect Definition** or over filled Spec Limit(s) Chair availability throughout the day Opportunity

MEASURE - Data Collection / MSA

A3

Our data was collected through our Electronic Medical Record program: EPIC. Kimberly Roach was able to access this information from the system.

One point that was surprising to our team was discovering that morning vs afternoon appointments did not have a statistical significance to the witness inefficiencies.

ANALYZE - Critical Xs / Root Causes Identified

- Hour
 - It was identified that the hour of which appointments were scheduled had a significant statistical impact on scheduling efficiencies

IMPROVE - What was Implemented

While we haven't yet had an opportunity to implement any process changes, we have been able to improve the visual management of supplies.

We were able to meet with the frontline staff. During this time, they spoke freely about what future changes they would like to see for the clinic. A PICK matrix has been made to display these options:

- A reference guide reflecting accurate timetables for difference procedures
- For two trained staff nurses to be working the clinic at all times
- Interface changes within the EPIC system (which is currently what is being used to schedule appointments)

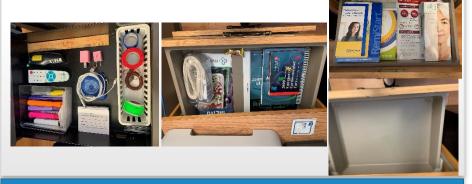


Briefly **describe** all of the interventions, processes changed, SOPs developed, RPIW conducted, etc. Include any system changes made.

IMPROVE – What was Implemented

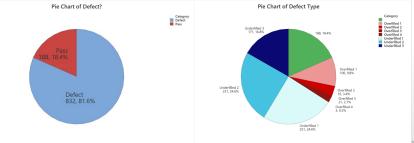
During the course of our project, we were able to organize the clinic workspace to better suit the work flow of the nurse(s). We eliminated unused files, cleared out previously cluttered space for future use, and helped establish a more functional in-room inventory.

Several after pictures have been included.



IMPROVE – Results to Date

We plan on collecting our future improve data the same way that we collected our baseline data. By using EPIC< we will be able to record when and how well patients were scheduled and seen by clinic staff.



CONTROL - Next Steps

How do you plan to keep momentum going to prevent critical x from reverting? At this point in time, we are planning to meet with our EPIC analysts to collaborate potential interface changes.

Have you calculated the project benefits to date? No, we have not been able to calculate a tangible project benefit to date.

What is your rollout plan and project "Close" timelines? December 31, 2022

Who are you "handing-off" to? Katlyn Wachter BSN, Director of Medical Oncology

OVERALL LESSONS LEARNED

Summarize findings that you learned about a) yourself

We learned that while this project was large and had multiple moving parts, breaking it down into sections made the overall process less intimidating and more manageable. b) your organization

Phelps Health is very supportive and excited to maintain our LEAN principals. c) process improvement or LEAN six sigma in general, etc.

Processes need to be evaluated and updated on a regular basis.

Did anything surprise you?

The amount of patients that arrived outside of their appointment time.

What would you do differently?

Take more control in deciding the phase rollout times.

NEXT PROJECT(S)

- Central Supply: After Hours Operations
- IV Pump Tracking
- External Physician Orders/Billing

REWARD AND RECOGNITION

Linde Merrow RN, MSN Jodie Sapaugh MHSM, MBA Katlyn Wachter BSN Cindy Butler BSN, RN-CNML Teresa Benney RN Brandy Parks BSN

Emily Rowden BSN