



Case Study

Transforming Office
Practice Flow-
A Quality Improvement
Specialist's Experience



Transforming Office Practice Flow - A Quality Improvement Specialist's Experience

Executive Summary

Measuring and improving patient satisfaction and staff vitality scores is essential in today's healthcare environment. This charge led the physicians and staff of a medical practice to study their office flow and to uncover the root cause of increased patient wait times and clinical inefficiencies.

Anecdotally, lack of patient education, coordination and communication of various patient appointments were identified as the source of much frustration among patients and staff. For this reason, department administration engaged quality improvement (QI) specialists to collect hard data and insights into the true flow of an office experience. The improvement specialists understood that identifying the current state of the experience was critical to making any lasting, impactful improvement.

Challenge 1: Data Collection and Communication

Using traditional pen and paper shadowing, QI specialists were able to capture the current state of the office practice over the course of a few weeks. However, they were unable to quickly collect or aggregate time stamped qualitative and quantitative data and found it nearly impossible to shadow multiple patients or caregivers at one time. The use of stopwatches and pen and paper had become cumbersome in the fast-paced office environment. The specialists needed to determine the best way to capture the entire patient appointment experience from multiple concurrent viewpoints while quickly sharing, reviewing and communicating data and impressions with the entire department.

- *Executive Summary*
- *Challenges*
- *Shadowing and goShadow*
- *Results and Future Steps*

Challenge 2: Reporting

Once multiple office appointment experiences had been collected, each of those objective and subjective data sets needed to be aggregated, analyzed and communicated with a large audience that rarely met in person. On average, manual processing for a single experience and the subsequent creation of reports took approximately eight hours of staff time. After the reports were created, it often took weeks to communicate those findings with staff and even longer to create an action plan, which led to a bottleneck in the improvement pathway.

Challenge 3: Tests of Change

Quality improvement specialists, after aggregating and analyzing data from an entire experience, needed to determine areas for improvement and small tests of change. While integrating these small tests, iterative shadowing of the entire patient experience needed to continue, with data to be collected and analyzed using standardized reporting templates. This burden on the QI team led to a data collection and reporting lag, resulting in outdated information and inefficiencies in the improvement process.

Shadowing and goShadow®

Shadowing was the ideal method for understanding the current state of the office experience and patient flow through any stakeholder's eyes. Using the goShadow mobile and web app, QI specialists were able to easily and efficiently shadow the office pathway from the perspective of the patients, their families, various caregivers and other clinicians. Coupling concurrently running timers with automatically time stamped notes, the QI specialists were able to document, categorize and communicate patient and staff impressions seamlessly. Using goShadow, automatic process reports and time studies were created. This enabled rapid identification of problem areas. Small tests of change were enacted to address what had been categorized as quick wins for all stakeholders--patient waiting time and office flow. goShadow was the tool used to quickly, iteratively and easily measure, track and report on those changes within the office and administrative environment.

Results and Future Steps

At the conclusion of the shadowing experience, it was discovered that 50% of total appointment time occurred in a waiting room; by using goShadow, it was identified that the source of most patient dissatisfaction and confusion was due to multiple uncoordinated clinical hand-offs over the course of the lengthy appointment. The quality improvement specialists realized they had to focus on two high-impact areas: waiting room throughput and clinical assignments during peak times.

Once the process discovery was complete, the quality improvement specialists tested small changes, including dedicated technicians for patients receiving more than one test during peak times. These changes allowed for fewer patient hand offs, increased testing throughput, more complete intra-office communication and elimination of an entire office segment and patient waiting area. As a result, total appointment time was significantly reduced. Patients reported higher satisfaction and increased perceived value in their experience. Similarly, staff reported that they felt greater vitality and engagement in their day-to-day work because they were a part of the improvement process. They were able to spend more time in direct patient care, which enabled them to focus on the patients' needs and perform their jobs more efficiently.