

Process Improvement for Patient Scheduling – Improve Revenue and Patient/Staff Satisfaction

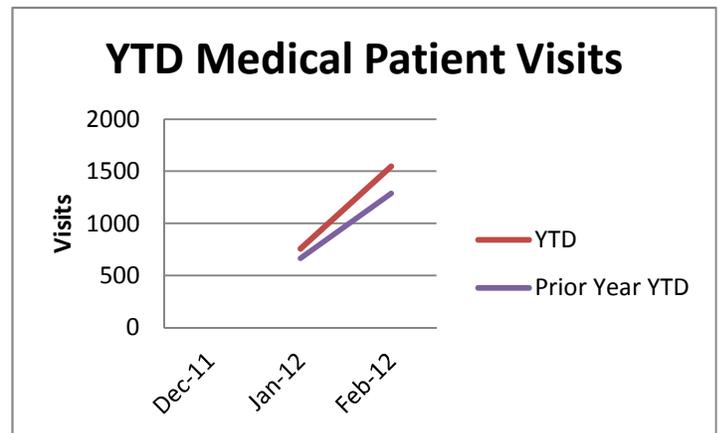
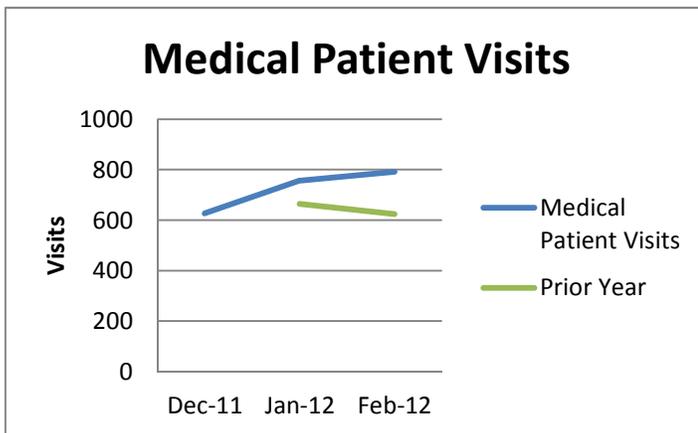


Cheyenne Health and Wellness Center in Cheyenne, WY is a Federally Qualified Health Center (FQHC) made possible by a grant from the Department of Health and Human Services (DHHS), donations by the City of Cheyenne, Laramie County, United Medical Center, civic groups, Cheyenne businesses, and private donors, and by the volunteer efforts of many concerned community members who believe healthcare should be available to all people. CHWC accepts all patients regardless of their ability to pay for services.

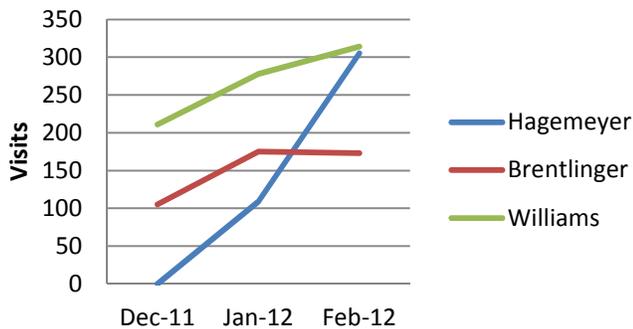
Over the course of 2011, revenues at Cheyenne Health and Wellness began to decrease while costs increased. Providers' schedules were not full and patient satisfaction suffered. The smaller number of appointments and the increase in patient dissatisfaction adversely impacted revenue and threatened clinic viability. As the problem grew, the executive team explored all their options, including the investment of significant financial resources in a marketing campaign to educate the community. Like most healthcare organizations without clarity on the root cause it was difficult to know where to start.

SigmaMed Solutions (SMS) was engaged in late 2011 on a HRSA funded project to bring CHWC into NCQA PCMH recognition and facilitate care coordination efforts with the Cheyenne Regional Medical Center. In an initial executive training and project selection session, it quickly became apparent that without closing the revenue shortfall the clinic would run out of money before making it to PCMH. CHWC determined the priority was to increase the funding stream. SMS helped a CHWC improvement team develop a project charter that could simultaneously increase revenues and meet specific patient access requirements of PCMH.

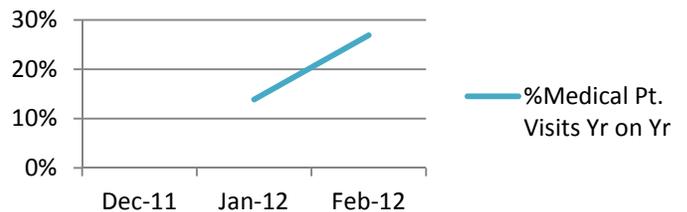
Following a statistical call volume time study it was determined that the phone system and call handling system were not adequate to handle the current call volumes. Enough calls were coming in to fill providers' schedules, but for various reasons a large number of calls were not resulting in appointments. After analysis, it was determined that a number of issues that were preventing full schedules. Frequently, incoming calls were not answered or were forwarded to a triage RN; non-answered calls routinely went to a voice mailbox that did not exist and therefore were lost. Triage RNs responsibilities were ambiguous and resulted in RNs providing telephone medicine and when not on the phone, Triage RNs were scanning documents for patient records. Providers and triage RNs were not practicing at the top of their licenses and this was also viewed as an unreimbursed cost. Several internal processes were addressed by the team and the graphs below represent the rapid outcome of improving these processes.



Provider Visits by Provider



%Increase/Decrease Medical Pt. Visits 2012 vs. 2011



In the Improvement Phase, the telephone contractor corrected the non-existent voice mailbox issue, specific positions were assigned to answer the phone, Triage RN expectations were defined and put in writing, a low-wage contractor was hired to scan documents two-hours daily so Triage RNs would be free for phone consultation, providers schedules were filled with patients seeking care and other provider specific duties.

In the Control Phase, key indicators were established to identify thresholds and criteria established to maintain current gains allowing CHWC to make immediate correction.

Not only has Cheyenne Health and Wellness seen a 47% increase in patient traffic, the SMS led teams also have been able to:

- Increase Daily Cash Collections by a factor of 10;
- Improve Patient Satisfaction;
- Improve staff satisfaction - Providers' work at the top of their license

As a byproduct of this initial project, other areas of improvement have already taken place like:

- CHWC has gone from two weeks to 24 hours to scan loose paperwork, either brought in by the patient or created in-house. The ultimate goal is scanning everything into the EHR as it is presented;
 - RNs no longer scanning – now accomplished by part-time minimum wage employee. Saving ~\$20/hour
 - Contracted 3-4 hours weekly for minimum wage person to scan documents, rather than RNs, saving thousands of dollars in lost productivity per month and increasing RN satisfaction
- Nurse triage responsibilities/limits were defined and resulted in 7-10 patient appointments weekly vs. nurse triage. Now, the triage RN more than pays for itself and the RNs work at the top of their license;
- The patient prescription refill process has been significantly improved, positively impacting both staff and patient satisfaction;
- Positioned for PCMH application

The Lean Sigma Healthcare Solution

1. Increased patient visits 47% - kept the clinic open;
2. Increased patient satisfaction;
3. Created continuous improvement mindset of clinic personnel
4. Removed ambiguity from Triage RN role
5. Reduced cost of scanning loose documents by nearly 66%

About SigmaMed Solutions

SigmaMed Solutions is a mission-driven professional services organization with decades of experience in applying Lean Six Sigma to healthcare quality, process improvement, care coordination and EHR implementation and optimization. We are committed to helping healthcare providers and facilities cost effectively implement Lean Six Sigma process improvements to improve safety, drive efficiency and increase effectiveness. We are dedicated to serving our clients in a "Lean" manner and all our work is unconditionally guaranteed.