

ACADEMY FOR EXCELLENCE IN HEALTHCARE

IMPACT ASSESSMENT PAPER

Executive Summary

Improved Patient Scheduling: New Scheduling Process Will Establish Workflow Model for New EMR

Blanchard Valley Health System (BVHS), a not-for-profit, integrated-care organization based in Findlay, Ohio, identified an improved scheduling process as a large opportunity to impact patient satisfaction, minimize patient leakage, and establish more patient-centered care. BVHS also is using changes to the scheduling process to establish and document an improvement approach and workflow model for other horizontal processes at BVHS in preparation for a new electronic medical records (EMR) system in 2016.

BVHS reviewed more than 10 horizontal processes that would be affected by the new EMR, and selected the scheduling process as an improvement model. Patient-experience scores for scheduling activities were inadequate, and a survey found that patients wanted a higher-touch experience and digital scheduling options. The survey also revealed patient dissatisfaction with long phone holds, busy signals, and redundant calls by BVHS functions.

A cross-functional improvement team trained for one week at the Academy for Excellence in Healthcare (AEH). The team scoped their project down to one scheduling process for the Women & Children's Center (W&C), an obstetrical and gynecological clinic. Changes to the W&C scheduling process will be applied to other disparate scheduling processes at BVHS. At AEH the team developed a high-level value-stream map of W&C scheduling, identifying 10 to 13 steps from outpatient scheduling to surgery and problems occurring within the value stream.

Upon returning to BVHS, the team held a three-day performance improvement (PI) event with key directors and front-line personnel. Scott Malaney — CEO and project sponsor — communicated the importance of the project and helped to address concerns regarding potential changes to jobs and scheduling roles. The PI event team analyzed the W&C scheduling activities in greater detail, which revealed a convoluted, time-consuming process that negatively affected patients (e.g., holds and

callbacks) and BVHS staff (e.g., multiple systems and handoffs and excessive faxing, printing, scanning, and questions of patients).

Goals were set to improve the patient experience throughout the scheduling process, to streamline/standardize the process for staff (eliminate non-value-added tasks), and to improve operational efficiencies. Potential improvements to W&C scheduling were categorized and prioritized:

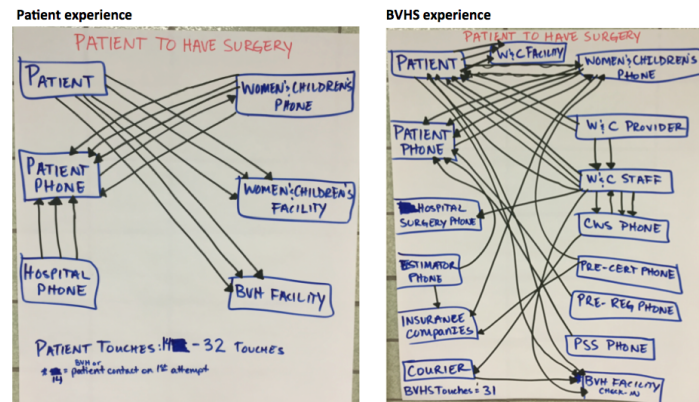
- Establish a high-touch process and improve speed and ease of use for patients (e.g., patients can leave their provider appointment with a scheduled and pre-registered date and time for diagnostic testing).
- Create a streamlined, efficient process (e.g., minimize duplicate information and non-value work).
- Redistribute workloads to provide better patient service (e.g., changing tasks across departments).

The improvement team began training staff and redesigning processes in May 2015, laying the foundation for a long-term model that will help other horizontal processes improve and prepare for their EMR implementation.

[Read the full study of the Improved Scheduling Process project](#), which provides insights on improving horizontal processes in advance of an EMR implementation (as opposed to force-feeding an EMR implementation on to processes). The project also illustrates the importance of having leadership support and sponsorship of initiatives of this magnitude, and it reveals a successful improvement path for transforming horizontal processes that cut across silos: start with a high-level perspective of the process and problem, and then directly engage stakeholders across the value stream, who establish the charter for improvement and drive support and buyin.

[About the Academy for Excellence in Healthcare](#): AEH blends in-person class time with hands-on project work, interactive simulations, and recurrent coaching, all aimed at helping healthcare teams spark actionable change at their organization. To learn more about AEH, contact [Margaret Pennington](#), Faculty Director, or [Beth Miller](#), Program Director.

Scheduling-Flow Analysis



Source: Blanchard Valley Health System