# An All-Inclusive Resort (to Change)



ACCESS \* IMPROVEMENT \* MEASURES

THORNHILL COMMUNITY HEALTH CENTER

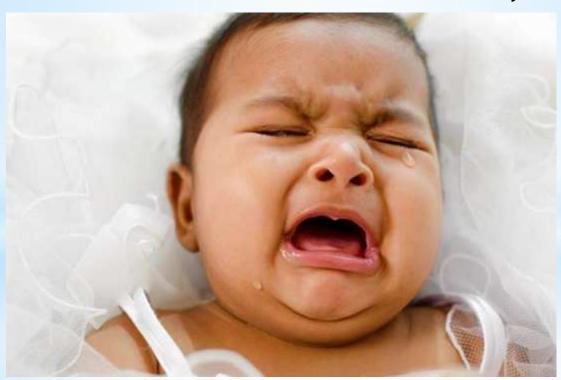
Well Child Immunization

June 21, 2017



# The only person who likes <a href="#">CHANGE</a> is a baby in a wet diaper!

**Anonymous** 



# An All-Inclusive Resort...



- AIM helps healthcare teams to assess their process to improve client access
- A collaborative model of learning for achieving high quality, team—based clinical care. The model was guided by expert facilitators but implemented at our local WC clinic (Thornhill)
- Following processes were applied:

### Team:

Improvement teams represented all key roles in the clinic - "those who do the work must change the work." The team (a nurse, clerk and managers) met every 1-2 weeks in addition to 5 X 1 ½ day learning sessions.

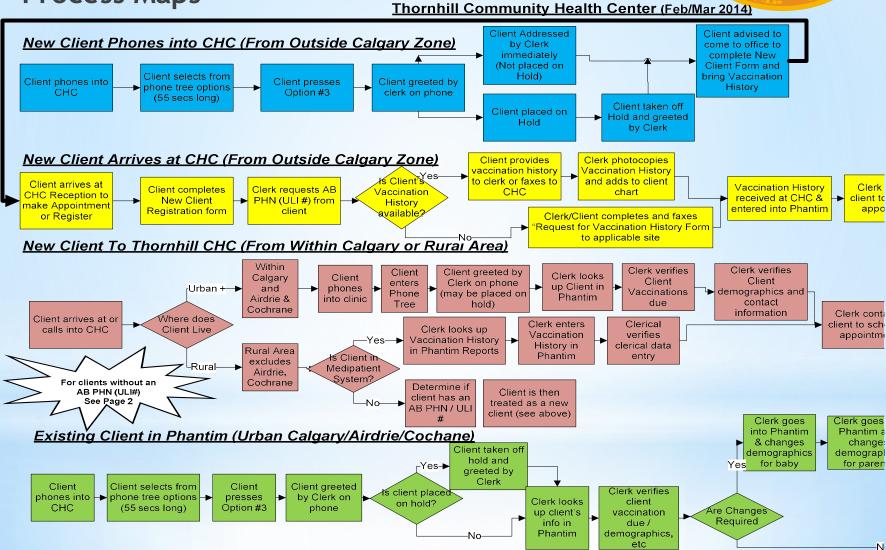
### Aim:

Set specific, measurable goals for access, office efficiency and clinical care.

## Map:

Built a flow map to understand all the elements of a client's visit through the clinic, and identified where challenges and constraints exist.

## **Process Maps**



## Measure:

Collect and analyze data to understand performance and assess the impact of changes (positive or negative improvements). Ongoing measurement is essential to improve and maintain top system performance.

## **Change:**

Tests of change are applied using The Model for Improvement PDSA (Plan-Do-Study-Act) cycles.

## Sustain/Spread:

Sustain the gains, celebrate success and spread a culture of improvement throughout the clinic and larger team or system.

## **AIM for Thornhill CHC**

- Reduce wait times from 65 days (Jan 2014) to 42 days by November 1/2014
  - ➤ With 2.0 FTE Augmentation and 100% Backfill, wait times were at 6 days by May 26<sup>th</sup>, 2014.
  - Augmentation and full Backfill were discontinued September 30<sup>th</sup> and wait times were back to 67 days on October 13<sup>t,</sup> 2014 (as of Mar 13/15 - 72 days).

## Office Efficiency Aim

- To increase process efficiency amount of time that the client can spend with the nurse in clinic is maximized.
- Decrease/address bottlenecks in the clinic process from the time the client checks in.



## **Patient Survey Analysis**

- > A total of 202 surveys were returned
- Rated length of time spent with the nurse during the visit = "Just Right" 96% of time.
- ➤ Rated the amount of information shared with them during their appointment = "Correct Amount" 95%.
- Rated their visit = "Very Satisfactory" 83%.

## **Areas for Improvement**

- Waited too long for an appointment.
- > Difficulty getting through on the phone to book an appointment.
- Waited too long on hold on the phone.
- > Waited too long in the waiting room to see the nurse.

## **ENGAGE STAFF IN AIM BY:**



- ➤ Idea Parking Lot for staff to document their suggestions for improvement/efficiencies with ongoing input of staff ideas.
- > PDSA Board in the staff room with up to date information on planned/completed PDSAs with accompanying data.
- > Health Care Team Effectiveness Analysis completed by all staff
  - > Designed to develop excellence in teamwork and collaboration.
  - Goal is to improve healthcare delivery through enhanced efficiency of interdisciplinary teams.
- Share AIM information at staff meetings.
- All staff are involved in implementing the PDSAs and provide feedback.
- > Storyboard was created with up to date information (available in clinic and presented at AIM Learning Sessions).

## **IDEAL SITUATION:**

# Demand matches Supply and matches Activity

## D = S = A



## **DEMAND**

- Demand is the measure of "workload" generated (appointment demand)
- Multiple ways to measure demand: yearly; daily basis; by panel size (number of clients in a practice); new appointments (new demand 2 month visit); return appointments (return demand).
- Demand is counted on the day it is generated appointment requested on October 15<sup>th</sup> for November 20<sup>th</sup>. The Demand is counted on October 15<sup>th</sup>. (Done manually by the clerical when the client requests an appointment (phone and in person).

## **DEMAND - Anticipated Demand Outweighs Current Supply**



## Example #1

- Birthrate of approximately 257/month with
  - 2 monthers = 2 X 30 minute appointments
  - 4, 6,12,18 monthers = 1 X 30 minute appointments
  - REQUIRE: 4626 X 30 minute appointments/12 weeks
- Staffing with <u>NO</u> augmentation provides 4302 appointments/12 weeks, therefore the clinic is short 324 appointments/12 weeks
  - This doesn't include vaccinating Preschoolers, Adults or In-Migration.
- Further, **Preschoolers** = **2628** children (upcoming year)= 606 appts/12 weeks.
  - We are **short 930** appts without considering Adults (10 minute appts) or In-Migration. This is based on Preschoolers coming throughout the year versus our reality = a surge before the start of the school year.

#### Note:

- Birthrate has now increased to approx 275/month.
- Calgary Zone Population increase of 38,000 from 2013 to 2014.

## **SUPPLY**



- Is a measure of what could be done (in a perfect scenario).
- Reflects the total number of minutes the provider <u>can</u> provide for appointments (captured in 10 minute increments with AIM).
- It's the number of available appointments and captures the planned work, not the actual work completed (e.g. clinic nurse away due to vacation/education etc. and not replaced).
- Appointment length has an effect on the available appointments per day (10 minute, 30 minute and 60 minute appointments).



## **ACTIVITY**

- Activity is also called the "supply used" and is the actual number of appointments seen.
- It measures the time (in minutes) that the provider <u>actually</u> spends with the client (those clients that show for their appointments).
- No Shows and Cancellations are NOT ACTIVITY they count as Demand but do not materialize as Activity
- Activity can be greater or less than either Supply or Demand

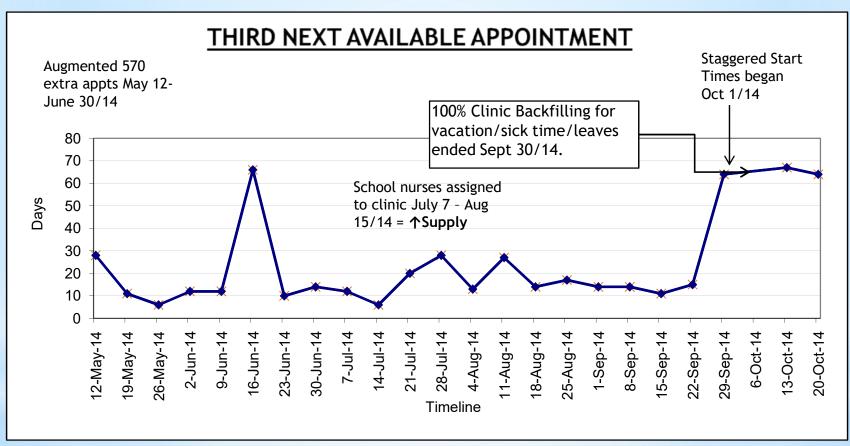
# **HOW TO MEASURE Demand, Supply and Activity**



- > This is performed daily
- **Supply:** Took the number of nurses assigned to clinic in Phantim to determine our Supply (each AM clinic, a nurse does 1x10, 1x60 and 4x30 min appointments).
- **Demand** is measured by the number of requests that the clerical receive for specific appointments. Demand is measured at the time of the call, not the actual appointment date.
  - Variance clerks may be busy and may not accurately track the appointments.
- > Activity is measured/entered daily by Secretary through Phantim.

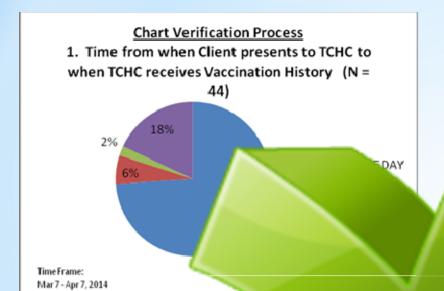
## THIRD NEXT AVAILABLE APPOINTMENT



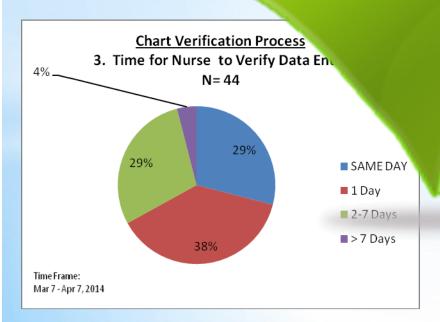


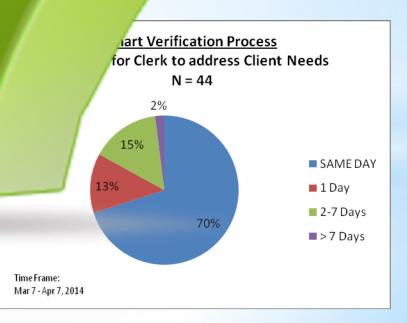


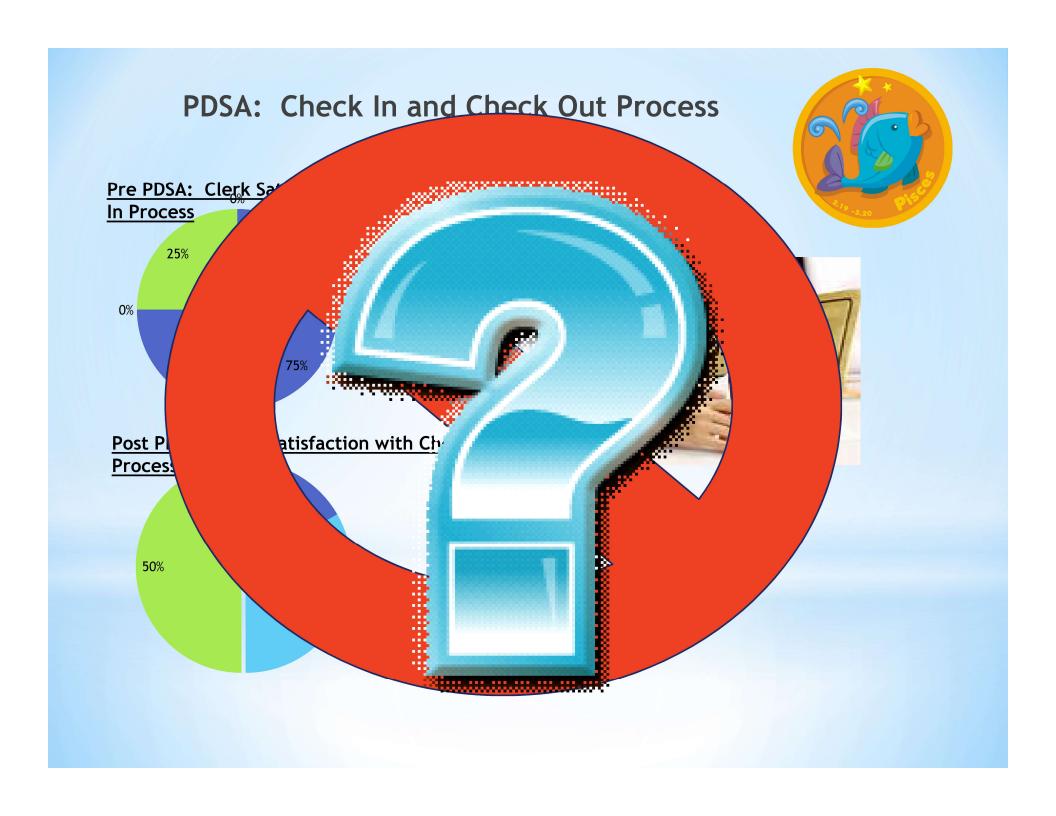














# PDSA: Another Nurse Weighs Infant



PDSA: Staggered Appointment Times **OLD SCHEDULE** Staggered, **Same Appointment Times** TIME **APPOINTMENT** LENGTH **MORNING CLINIC** 0815 - 0820 5 minutes Set Un 081 0820 - 0830 0830 - 0900 0900 - 0930 utes 0930 - 1000 minutes 1000 - 1015 Coffee Coffee mins) 60 minutes 60 minutes Are 2 X 30 mins Are 2 X 30 mins 1015 - 1115 combined combined 30 minutes 1115 - 114<u>5</u> 30 minutes 1145 - 1155 10 minutes 10 minute

1200 - 1215

1215 - 1245

15 minutes Clean Up

Lunch

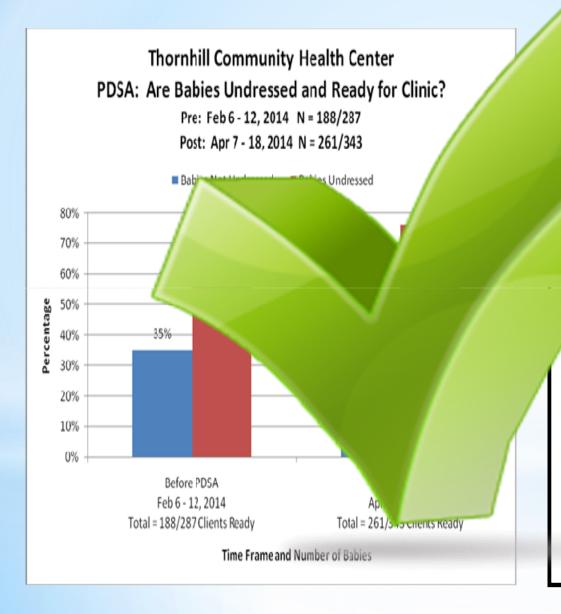
1155 - 1215

1215 - 1245

20 minutes Clean Up.

Lunch Break

PDSA: Undress Baby Before Appointment













## The Early Years Bookmark



788 3

Common Health Concerns

Development

How to Take Temperatur

**Immunizations** 

#### Nutrition

- · Breastfeeding p. 69
- Infant Formula p. 99
- · Vitamin D Recommendations p. 65

#### Preventing Injuries 146

Sleeping 130

Back to Sleep.

Teeth and Mouth 127

Wipe down gums.

Your Baby's Head Shape 137



#### We are now online

For more information search "Young babies" at healthyparentshealthychildren.ca



Young Babies: The Early Years Bookmark

#### Vision

· Visit an Opto to find one ne



#### We are now online

For more information search "Older babies" at healthyparentshealthychildren.ca



www.jdennissn.wix.com/hphc

237, 269

293

Communicate 250, 279

ation on sounds, speaking two es at home, and other speaking Ities, visit Talk Box at

arentlinkalberta.ca/publish/920.htm

#### Nutrition

· For recipe ideas and guides to healthy eating visit healthyalberta.com

#### Preventing Injuries

244, 274

272

274

2/0

· Helmet safety.

· Forward-facing safety seat and booster seat.

#### Teeth and Mouth

 For additional resources, call your dentist. or visit myhealth alberta.ca

#### Vision and Hearing

· Visit an Optometrist once per year; no cost until age 18. Go to optometrists.ab.ca for more.



#### We are now online

For more information search "Preschoolers" and "Young children" at healthyparentshealthychildren.ca



oung Children: Year Olds

## PDSA: Posting Cost of No Shows in Waiting Room



**Thornhill Community Health Center** 

## The Cost of "No Shows"

(If you miss your appointment)

July:

\$10

(162

(120

Lost in taxpaye.

PLEASE CANCEL as soon as possible so we can offer it to another clies

Thank you very much - the staff at Thornhill



## c in taxpayer's dollars

(89 No Shows)

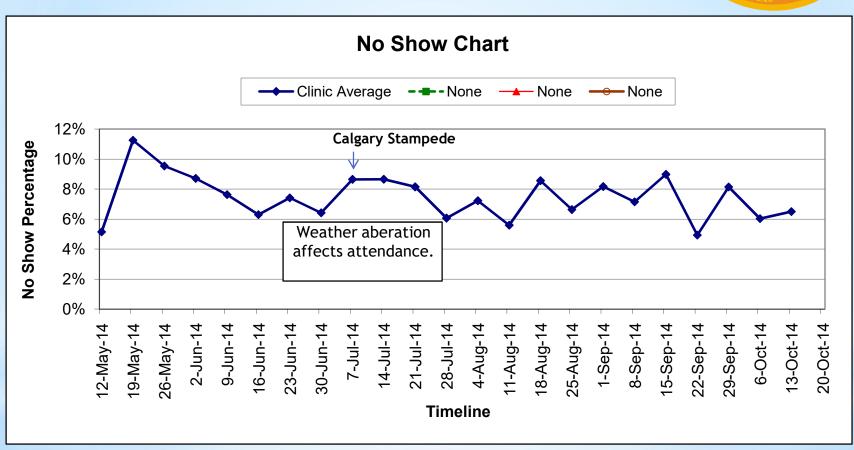
able to keep your appointment,

<u>EASE CANCEL</u> as soon as possible so we can offer it to another client.

Thank you very much - the staff at Thornhill



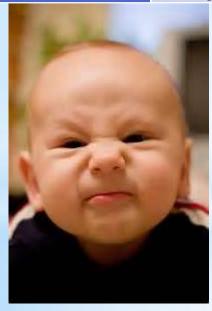
## PDSA: No Shows



## PDSA: Increasing Supply with Appointment Schedule

# PROPOSED SCHEDULE (3 mornings/week) Underutilized 10 minute appts = ↑30 min appts

TIME	APPOINTMENT LENGTH		
0820 - 0850	30 minutes		
0850 - 0920	30 minutes		
0920 - 0950	30 minutes		
0950 - 1005	Coffee Break (15 mins)		
	Are 2 X 30 mins combined		
1005 - 1105	60 minutes		
1105 - 1135	30 minutes		
1135 - 1205	30 minutes		
1205 - 1220	Stocking Rooms		



Thinking or Stinking!



Proposed schedule will ↓ the underutilized 10 min appts and gain a 30 min appt for each nurse - M,W,F (if you have 5 AM clinics each (M,W,F) = 15 additional 30 min appt per week. Will have 10 min appt in Evenings and Tuesday & Thursday all clinics

## May 23 - June 27th, 2014

**Supply** = 496 appts

**Demand** = 384 appts (77% used)

Activity = 343 appts (89% of the Demand)

Activity (69% of the Supply)

No Show = 39 appts (10.1%)

112 appts not booked

115 +39/496 appts were not used = **30.4**%

## September 02 - October 04, 2014

Supply = 435 appts

**Demand** = 310 appts (77.42% used)

Activity = 277 appts (89% of the Demand)

Activity (64% of the Supply)

No Show = 32 appts (10.3%)

157 appts not booked

157+32/435 appts were not used = **43.4**%

## PDSA: Preschool Appointment Recall

Mail out monthly reminders to parents re: Preschooler's Vaccinations



- > @ 200 reminders/month to balance the Demand stream.
- > 37% of 162 No Shows for July, 2014 were Preschoolers.

Re-evaluate this PDSA as there are plans to use the automated dialing system to do this.

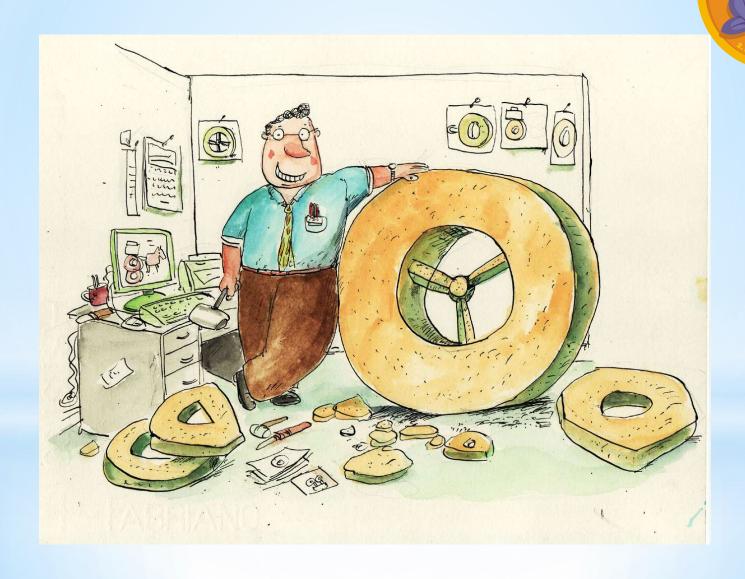




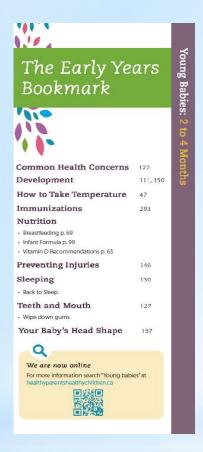
## **GOING FORWARD**

- ➤ Rolled out to Calgary Zone Community Health Centres:
  - ➤ Undress your baby poster
  - **▶** Bookmarks for HPHC Resource
  - Modification of the phone tree at various sites
  - Measurement of Demand, Supply & Activity
  - ➤ Wait list management process
- At Thornhill we now have a QI committee (Clinic rooms, Student anxiety, etc.)

## **Resources to Share**



## **Resources to Share**



#### THORNHILL CLERK SATISFACTION WITH NEW CHECK IN PROCESS (Pre PDSA)

















Working Great "Awesome Dude"

Please check off which box applies.



Name of client	Date client filled in new client demographic form	Date vaccination records received (could be same day)	Date vaccination dates entered	Date chart verified by nurse	Date booked into clinic by clerical	Comments
	0	2	6)			9
		4				
			8			

How	would	you	rate	this	wait?

Not Acceptable At All	Not Very Acceptable	Moderately Acceptable	Acceptable	Very Acceptable

How would you rate the usual wait for an appointment when you (the patient) are sick

and our your moulour or an appointment.					
Not Acceptable At All	Not Very Acceptable	Moderately Acceptable	Acceptable	Very Acceptable	

How would you rate getting this medical appointment fitting in with your schedule?

Very Easy	Fairly Easy	Neutral	Not Very Easy	Not At All Easy

#### How long did you wait for your appointment to start after you arrived?

- ☐ Less than 5 minutes
- ☐ 5 to 10 minutes
- ☐ 11 to 20 minutes
- ☐ 21 to 30 minutes
- ☐ More than 30 minutes
- ☐ There was no set time for my appointment

#### How would you rate this wait?

Not Acceptable At All	Not Very Acceptable	Moderately Acceptable	Acceptable	Very Acceptable

How would you rate the length of time spent with the healthcare provider you (the patient) saw today?

Much too short	Too short	Just right	Too long	Much Too Long

#### How often do you leave the doctor's office with unanswered questions?

•		•		
Never	Sometimes	Often	Always	



#### **Please UNDRESS YOUR BABY** (2 - 24 Months of Age) **TO A DRY DIAPER** =more time with the nurse



# **QUESTIONS**





For more information:
Sandy Phillips - <a href="mailto:sandy.ca">sandy.phillips@ahs.ca</a>
Wendy Timmermans - <a href="mailto:wendy.timmermans@ahs.ca">wendy.timmermans@ahs.ca</a>