

IPRO 340 TEAMS

All sub-groups of IPRO 340 have worked towards a common goal:

PATIENT SATISFACTION

ACCESS FACTS

Chicagoland's largest private primary health care provider

Largest network of community health care centers in the country.

50 community health centers

ACCESS' Board of Directors is composed over 51% patients and community members to ensure that programs and services are responsive to community needs.

\$106 million operating budget.

* information acquired from www.accesscommunityhealth.net

ACCESS FACTS

Patients

ACCESS serves roughly 11% of all Medicaid recipients living in Cook County (Chicago and surrounding suburbs) and 7% of all Medicaid recipients living in DuPage County.

300,000 underserved patients

60,000 uninsured patients (10% of Chicago)

Staff

ACCESS employs over 800 employees, including over 200 Board Certified and Board Eligible medical providers.

Many ACCESS staff is bi-lingual or multi-lingual to meet the language needs of patients. ACCESS staff speaks a total of 34 languages.

Patient Feedback

“Strive for 5” surveys in English and Spanish (1-5 rating scale)

* information acquired from www.accesscommunityhealth.net

IPRO 340 TEAMS

4 Sub-groups created and assigned a site

Team 1 Clinics A & B

Team 2 Clinic C

Team 3 Clinic B

Team 4 Clinics D & C

Observations were recorded at each individual site

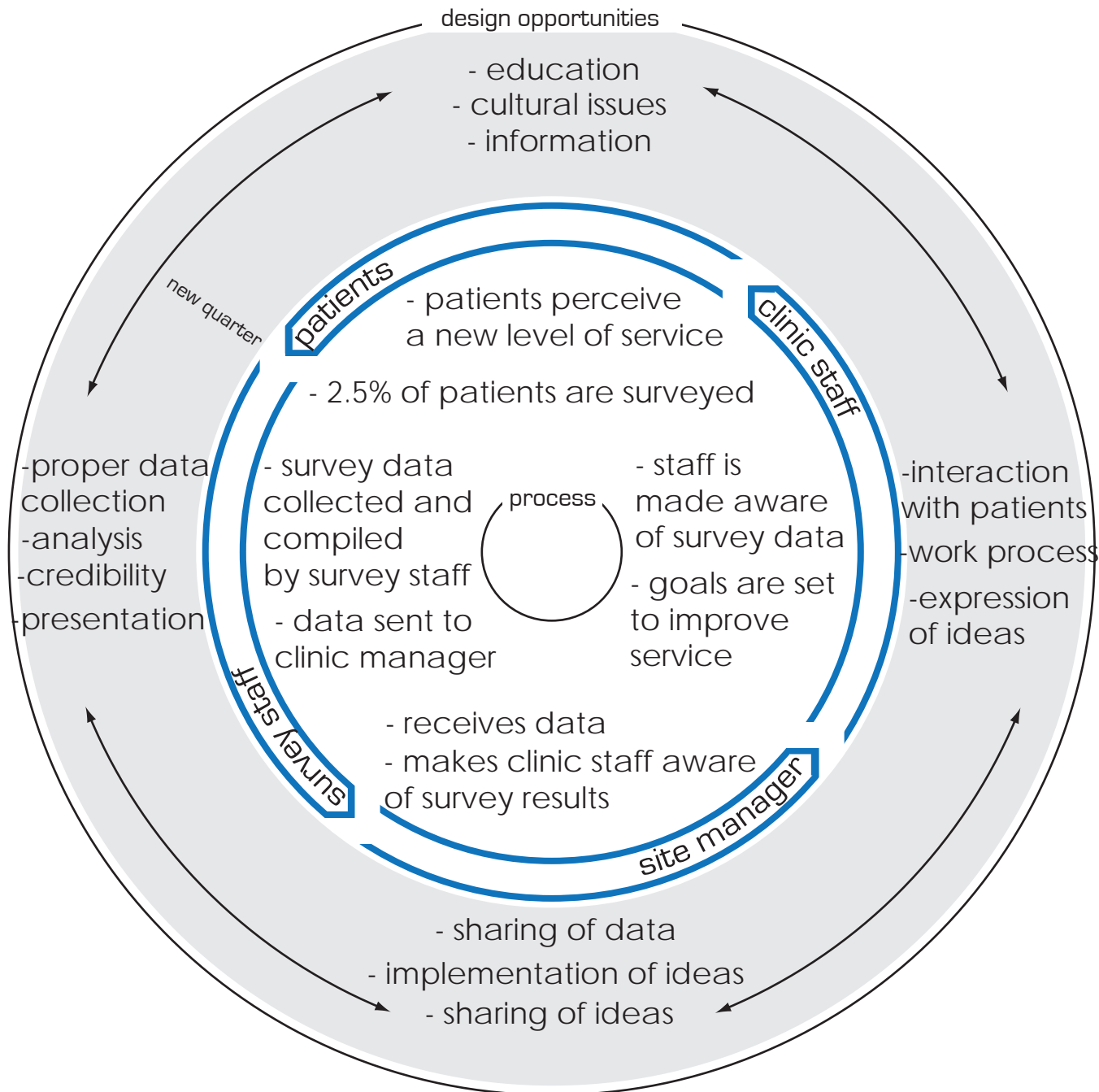
Each team decided to focus on the major issues of their respective sites

Objective

ACCESS Community Health Networks pursuit of the highest quality of healthcare is changing the way the uninsured and underinsured populations of Chicago receive healthcare. Patient Satisfaction Surveys are used as a means of evaluation of the various clinic quarterly performances.

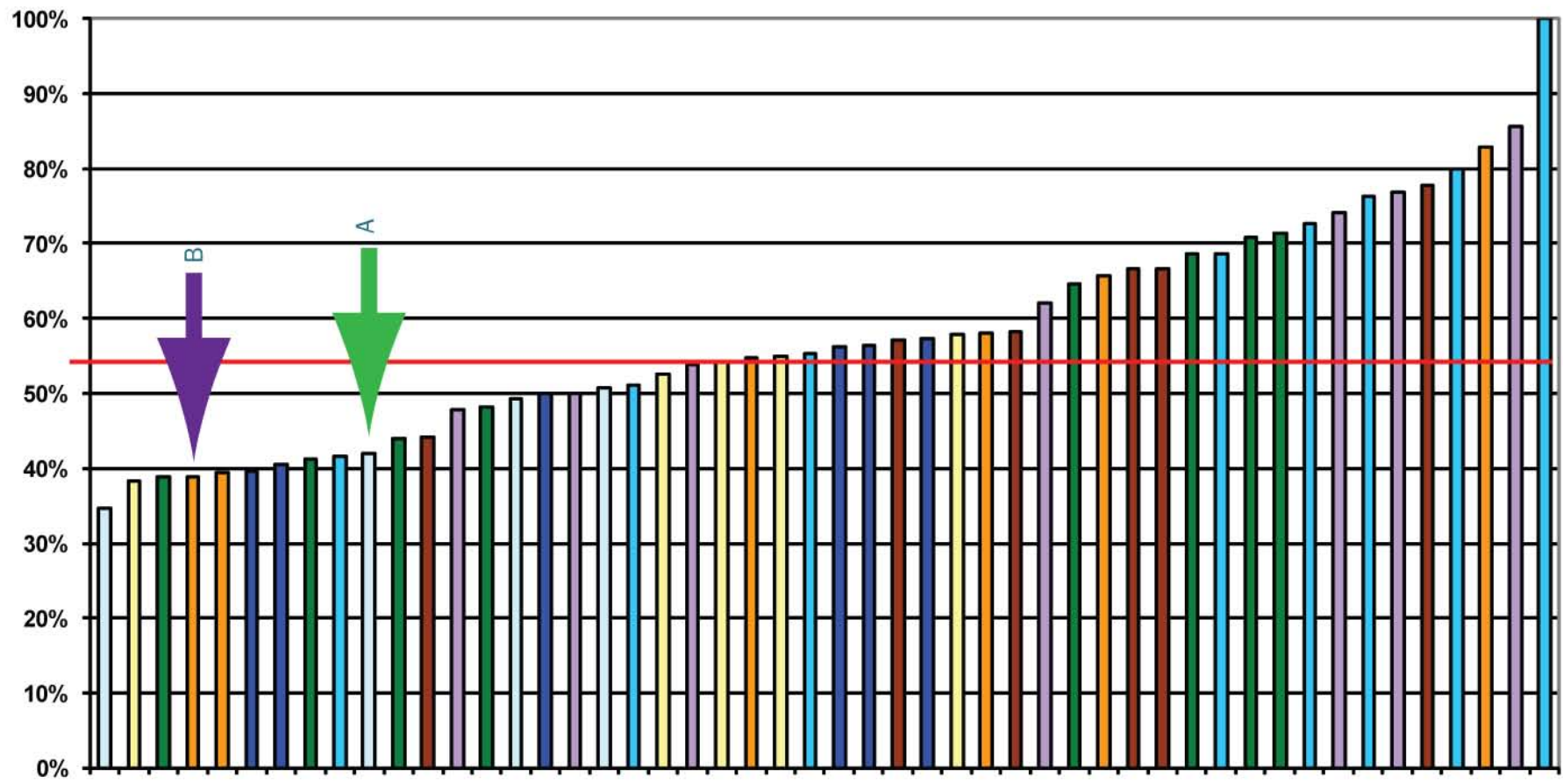
Our focus is on the process of how the clinics receive and interpret the data and how data can impact the clinic and staffs views of the clinics performance. This will aid the clinic staff in deciding what aspect of the survey needs to be focused on.

Quarterly Patient Satisfaction Improvement

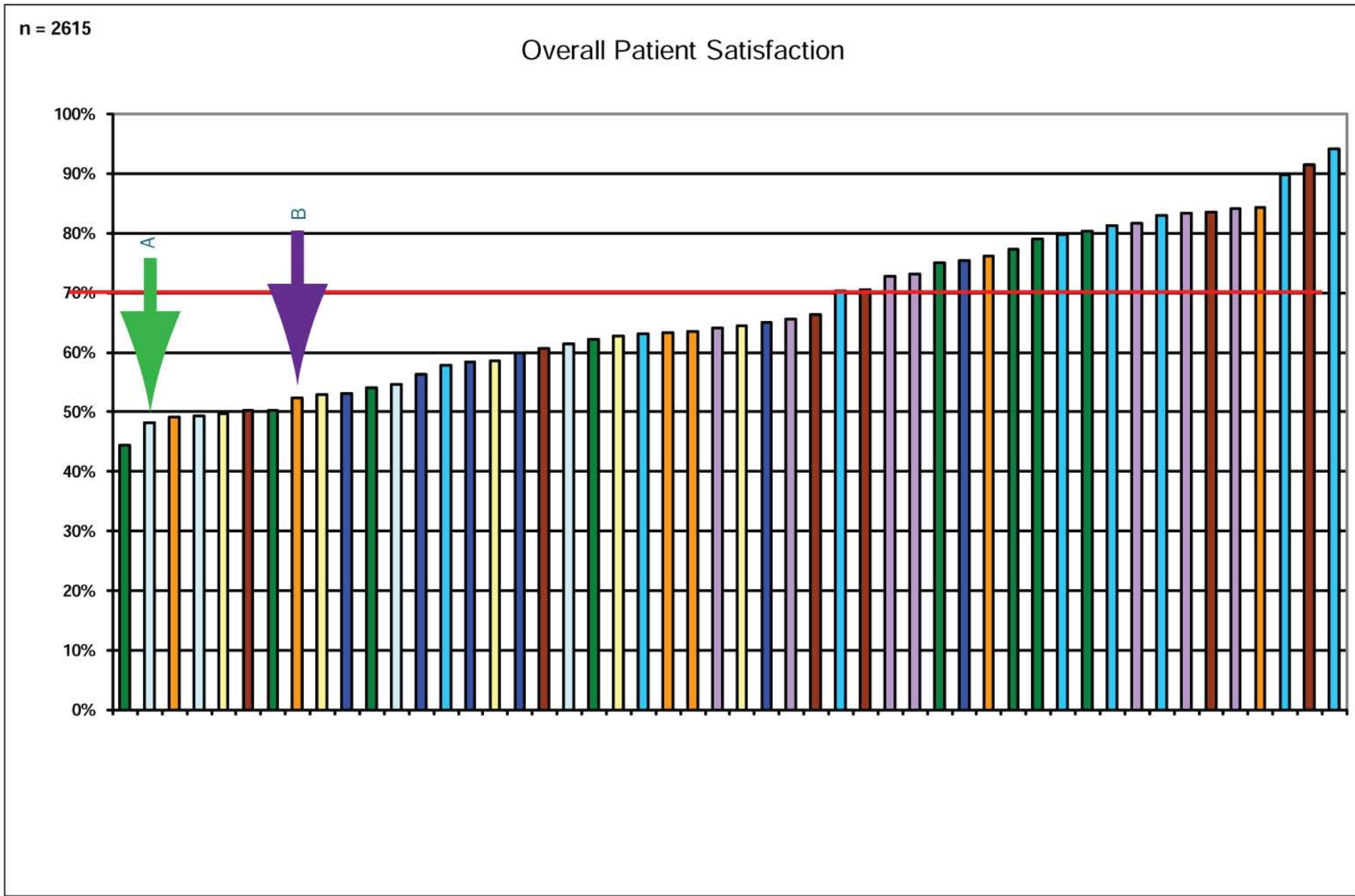


Current Charts

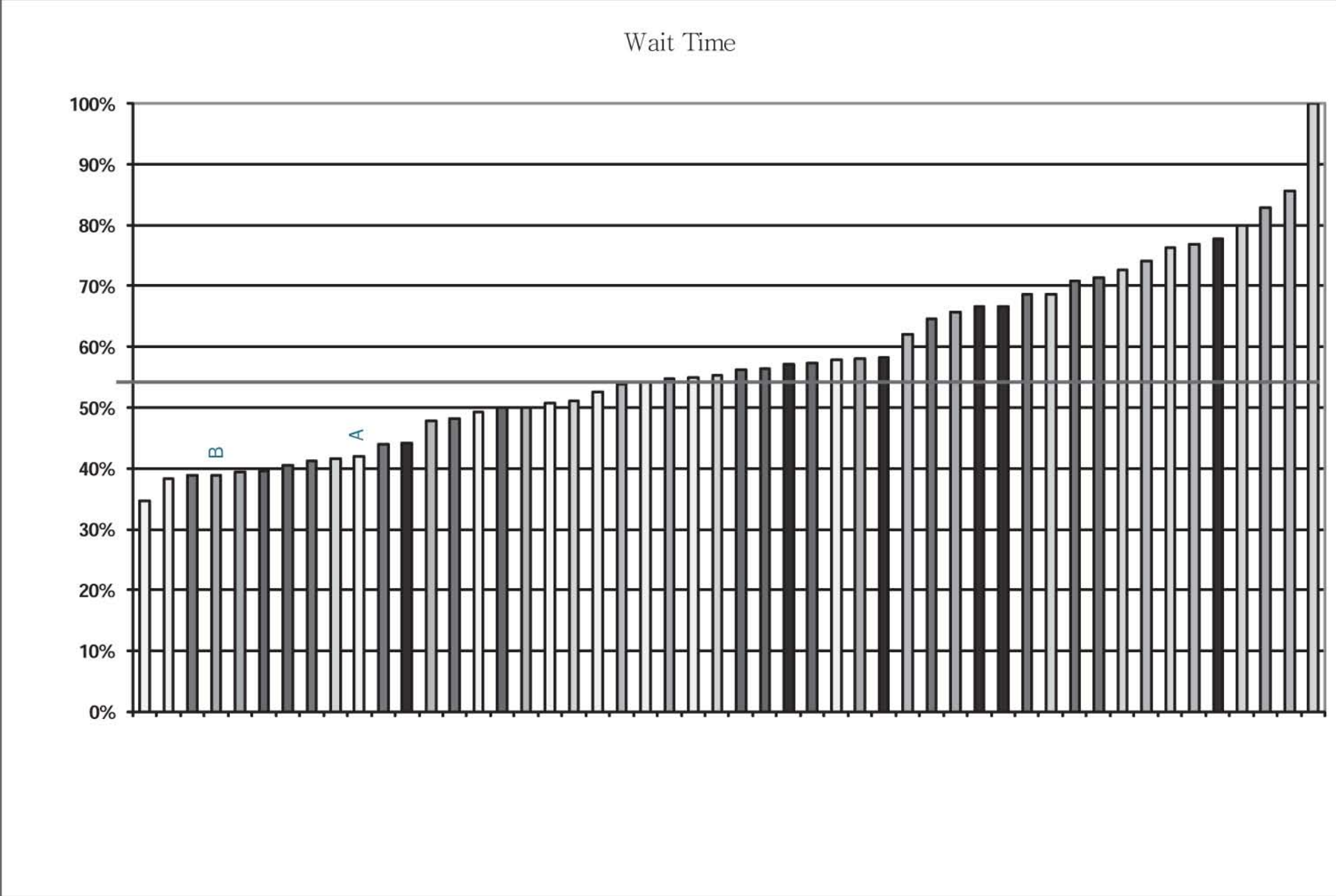
Wait Time



Current Charts

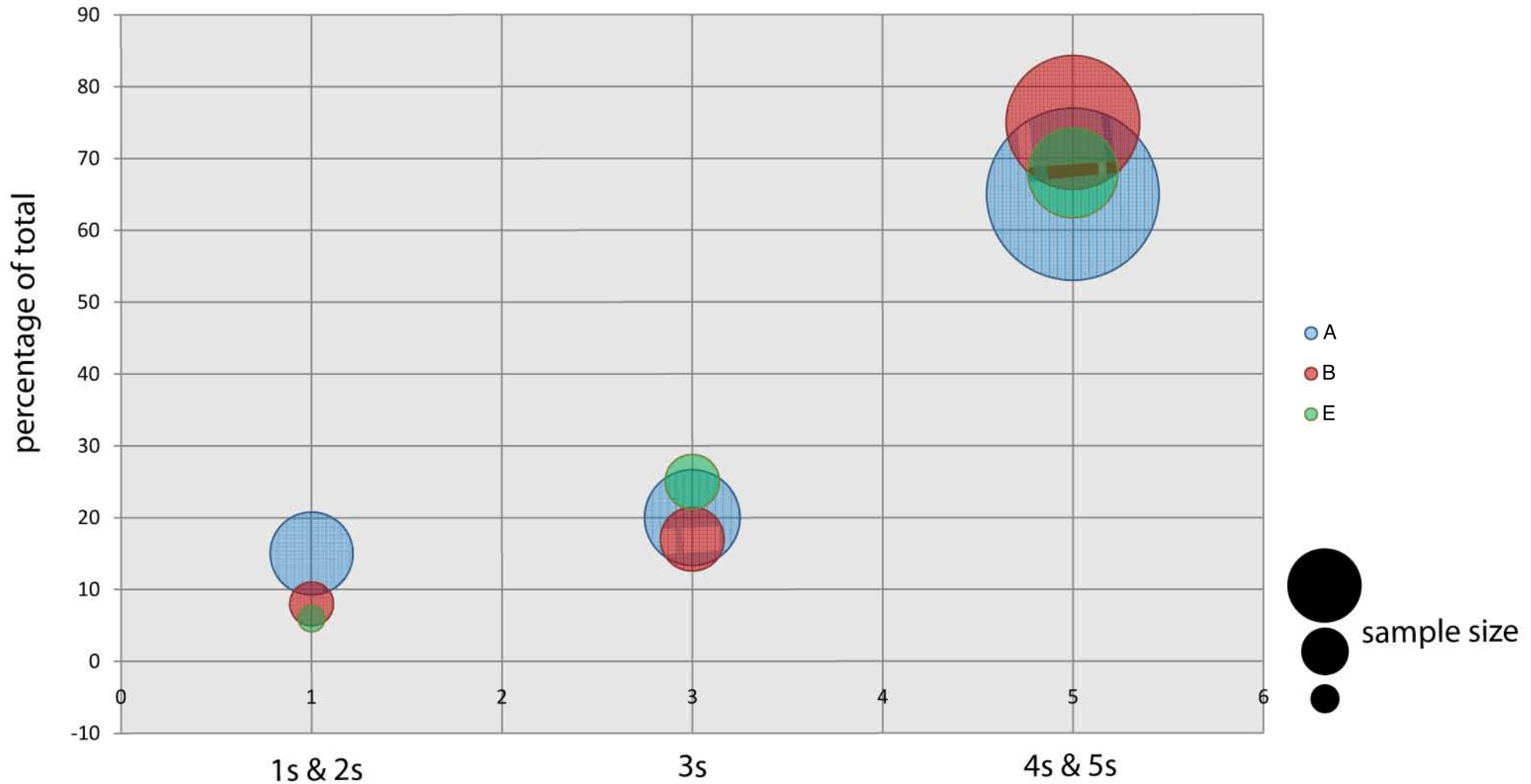


Current Charts - Grayscale



Service Improvement Cycle

Patient Satisfaction Metrics (Wait Time)



Patient Satisfaction Survey

ACCESS COMMUNITY HEALTH NETWORK

Caring. Committed. Connected.

Patient Satisfaction Survey

We would like to know how you feel about the services we provided to you **TODAY**. Your responses will help us improve our services.

All responses are kept confidential. Thank you for your time.

Date: _____

Health Centers Name: _____

Doctor Seen Today: _____

Please circle: New Patient (or) Established Patient

Please circle: Appointment (or) Walk-In

Please circle age of Patient: 0-14 15-30 31-50 51 or older

Number of times visited this health center? 0-3 4-6 7+

Have you ever filled out this survey before? Yes (or) No

How did you hear about our clinic? Newspaper / Article / Friends / Relatives

Other _____

Is there anyone that you would like to recognize today for their service?

Name: _____



Please circle how well you think we are doing:	GREAT	GOOD	OK	POOR	VERY POOR	
1. Give us a score on the length of time spent waiting to see your doctor/medical provider. How long did you wait today? _____	5	4	3	2	1	
2. Give us a score on the courtesy and caring provided by your doctor/medical provider.	5	4	3	2	1	
3. Give us a score on the courtesy and caring provided by your medical assistant/nurse.	5	4	3	2	1	
4. Give us a score on the courtesy and caring provided by your receptionist staff.	5	4	3	2	1	
5. Give us a score on the timeliness of answering your phone call.	5	4	3	2	1	N/A

What is it about our clinic that keeps you coming back?

If any responses to this survey were scored a 2 or 1, please give us your reasons so that we can improve :

What can this clinic and ACCESS Community Health Network do to obtain a score of 5's?

If you would like to speak to us about your experience, please leave your name and phone number and we will call you.

Thank you for helping us provide you high quality health care.

Quarterly Comments

Patient Satisfaction Comments
Center A

Reason for Referrals

Page 1 of 4

Reason for 2 (poor and 1 very poor)

Page 2 of 4

What can this clinic and ACCESS do to obtain a score of 5/5?

Page 3 of 4

Page 4 of 4

Quarterly Comments

“What can this clinic and ACCESS Community Health Network do to obtain a score of 5’s?”

phone

service / staff

wait times

reception

miscellaneous

What can this clinic and ACCESS do to obtain a score of 5's?

Page 1 of 2

Quarterly Comments

“What can this clinic and ACCESS Community Health Network do to obtain a score of 5’s?”

phone

service / staff

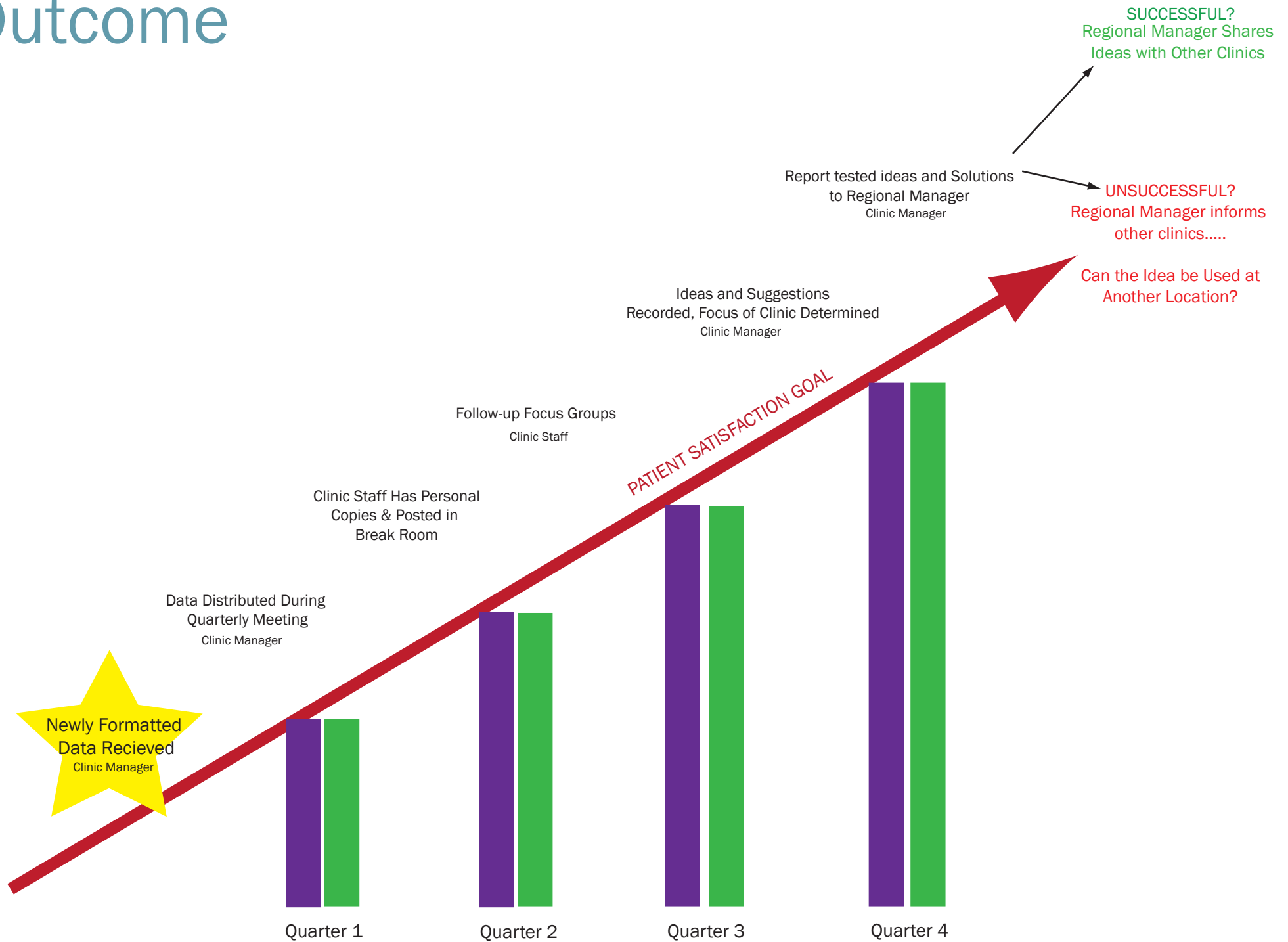
wait times

reception

miscellaneous



Outcome



Opportunity areas

A word cloud of opportunity areas in a healthcare setting. The words are arranged in a roughly circular pattern around a central point. The words are: Patient/clinic interface, Scheduling and appointments, Kids activity and hygiene, Wait Time, Waiting room experience, User flow, Doctor-patient interaction, Educating kids, and Operation efficiency. The words 'Scheduling and appointments', 'Waiting room experience', and 'Wait Time' are the largest and most prominent.

Patient/clinic interface

Scheduling and appointments

Kids activity and hygiene

Wait Time

Waiting room experience

User flow

Doctor-patient interaction

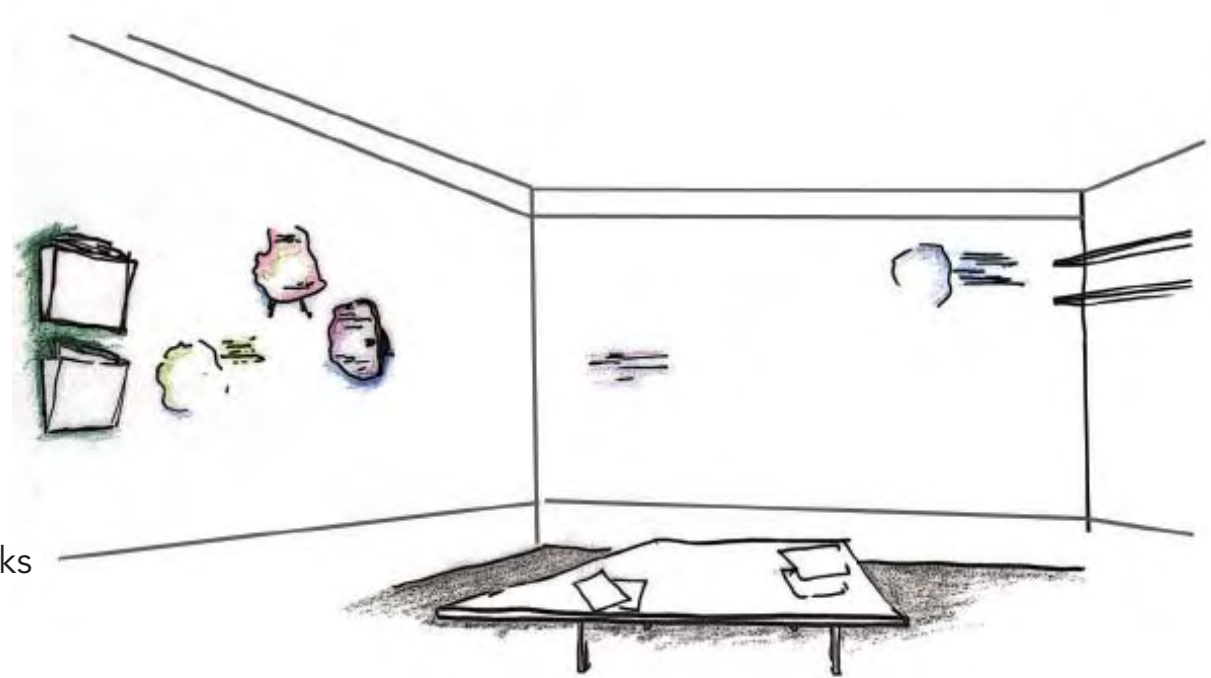
Educating kids

Operation efficiency

Kids - Activity & hygiene

Design principles:

Solutions must aim towards **creating a better waiting experience** for the kids by engaging them in **activities and games while educating them** about health and hygiene



Gift making kiosk - display case of kids works

Fun interactive wall - play and learn

Different games for different wait time

Team games involving parents and kids

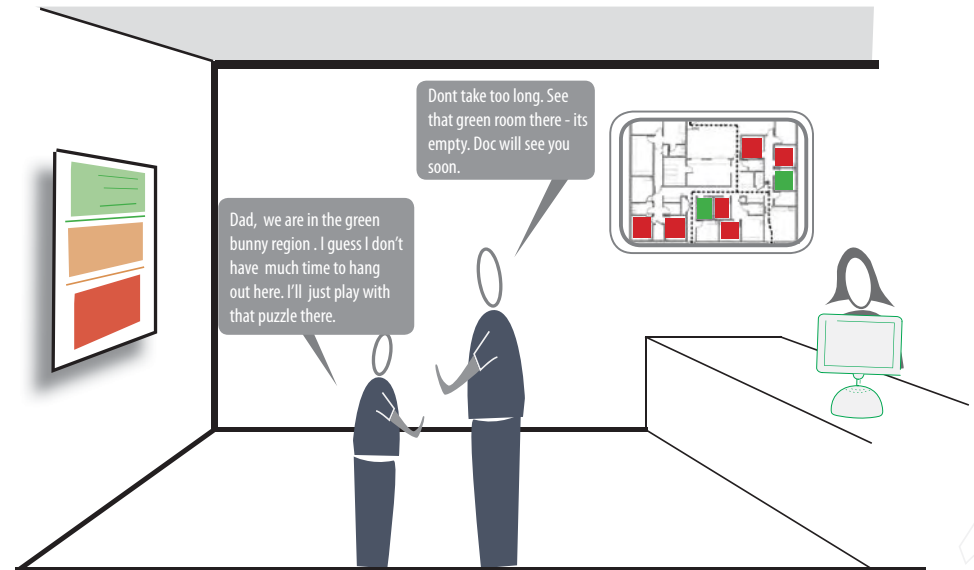
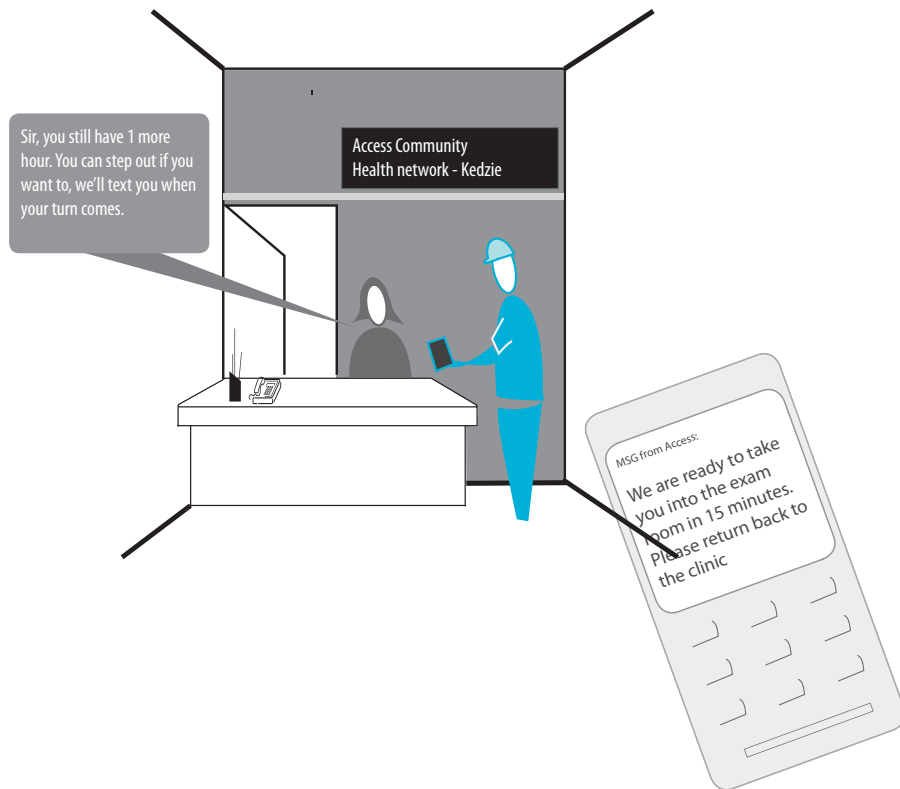
Sanitization kiosk for cleaning hands and toys

Dedicated play area for kids, color coded according to various wait time

Appointments and scheduling

Design principles:

Solutions must aim towards **creating a transparent system** which not only reduces the wait time but also takes care of **patient's needs while they wait**



Mobile alerts

Dedicated walk-in time and dedicated doctor for walk-ins

Wait time index - electronic or manual color coded display to inform people about their wait time

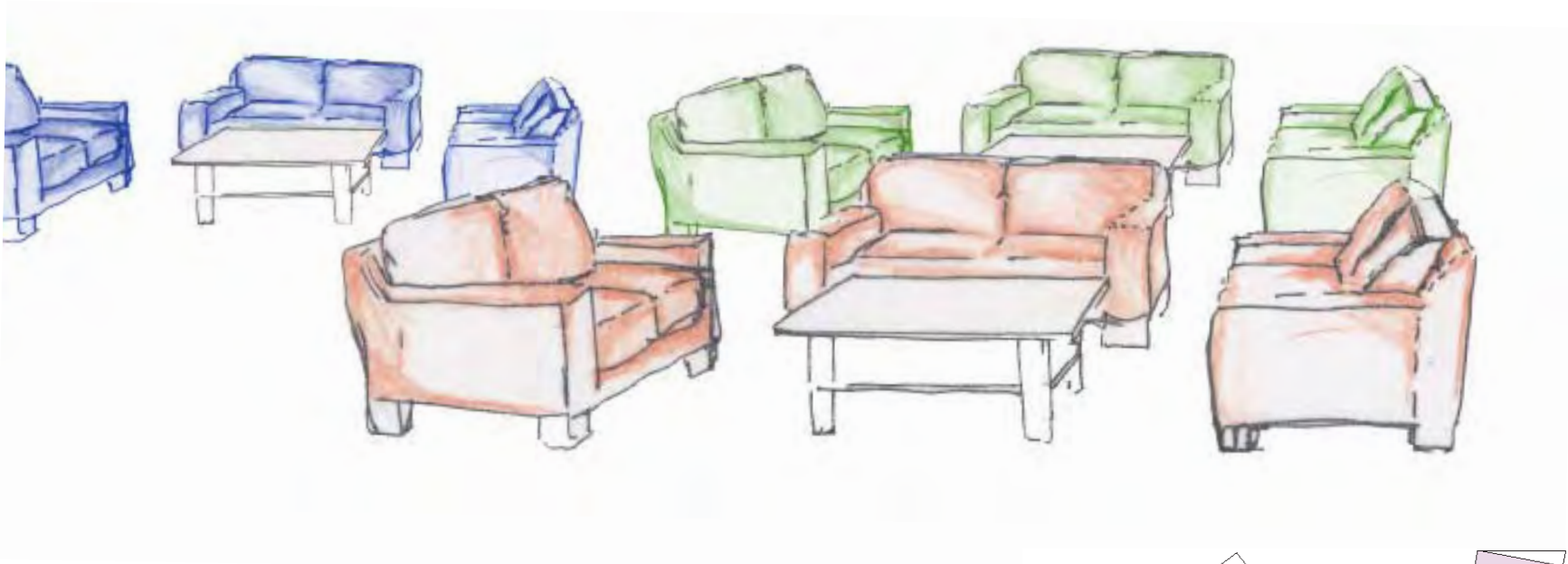
MA station with scheduling map

Visual displays showing user flow diagram - which rooms are free and which ones are busy

Waiting room experience

Design principles:

Solutions must aim towards designing a waiting room space that is **warm and soothing, a space that nurtures and heals** and a space where kids can **play and learn while they wait**.

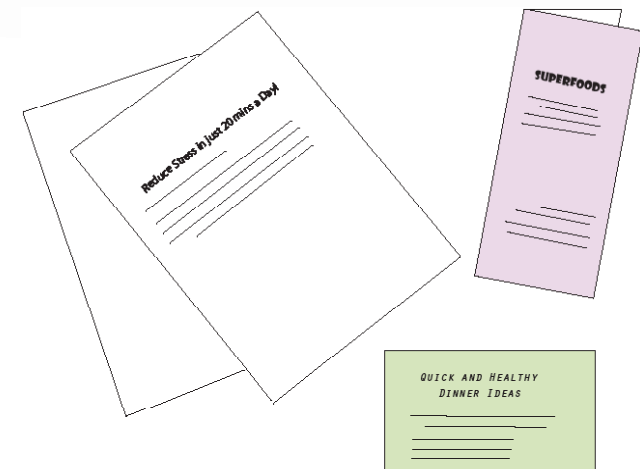


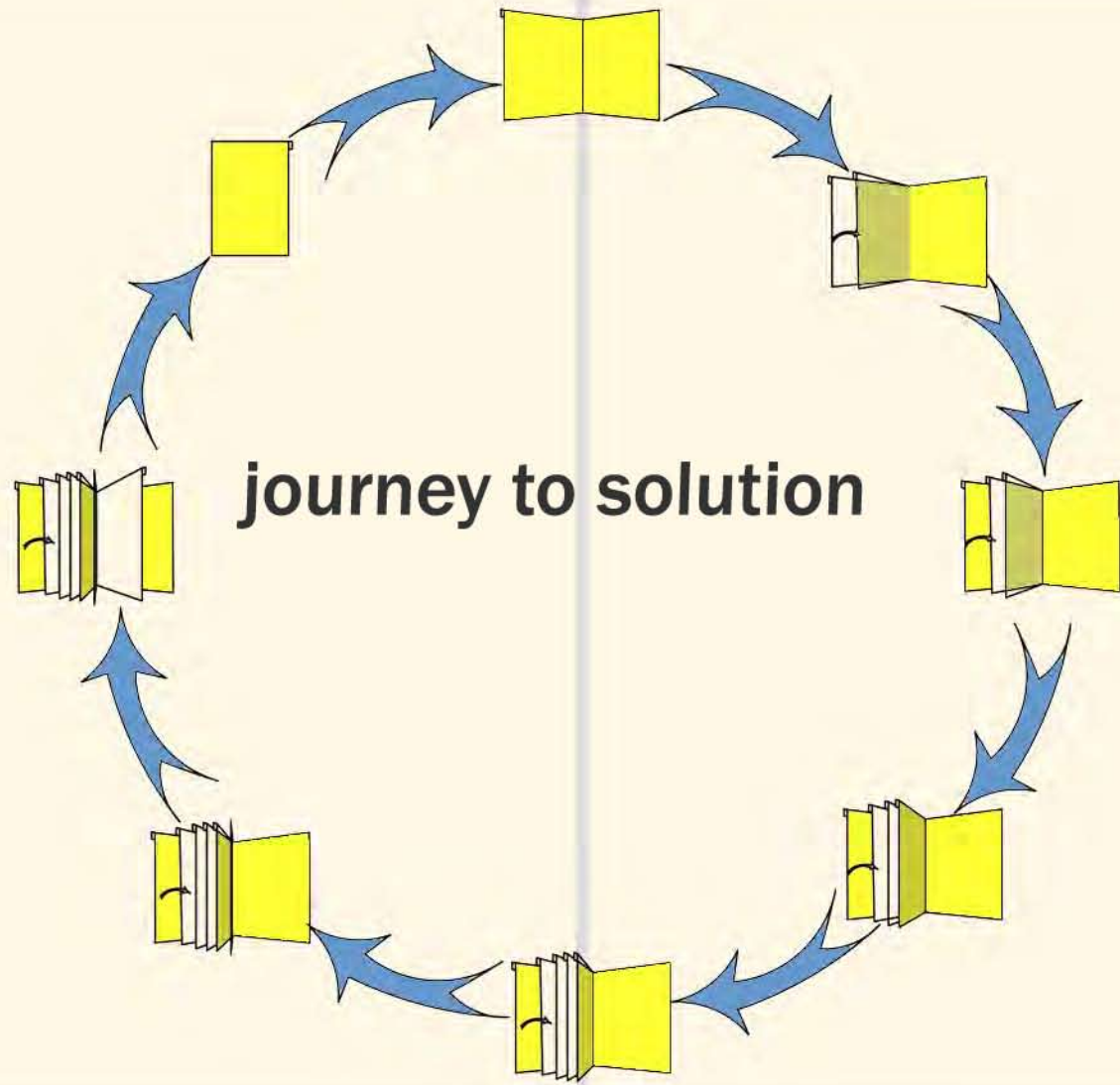
Informal spaces to foster social interaction

Lounge space for the really sick

Nutrition info (health and wellness brochures), health tidbit cards

De-stress zone: Yoga TV - breath while you wait





OBSERVATIONS

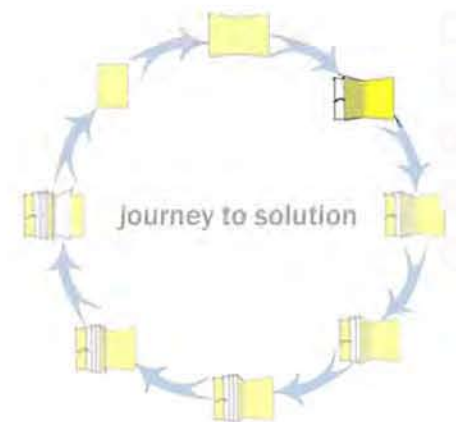
File Storage system

Temporary Stored = Temporary Lost

Lack of consistency (increased waiting time in waiting room and on phone)

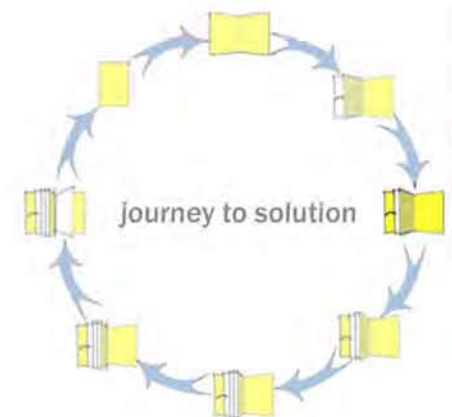
Technical Issues

Association with current system -bad experience- think that electronic health record will be the same.



Benefits of Electronic Medical Record System

- Drug prescription: Help with *accuracy* and *avoids conflicting prescribed drugs*, with warnings embedded in software.
- Outreach: use of email, letters, phone calls and consequently *improvement of patient health*
- Records indicated increase in *patient satisfaction*
- 24/7 access to patient record, ability for *immediate prescription renewals*
- Patients can track their *health status* online
- *Enhances detection* and reporting of vaccination
- Call management: affects overall *responsiveness of entire facility*.
- Handle more calls and deliver fast and accurate advices over phone
- Linked with appointment system
- Link to patient monitoring devices

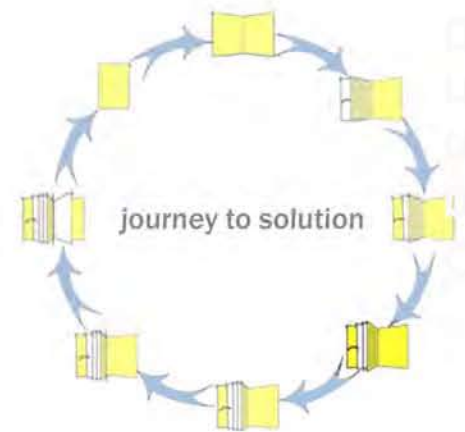


Our Ideas

Invisible Training for Electronic System

Design intermediate process/system to introduce staff and patients to rationales behind electronic health record system

Break Link/association between current system and future system



Transition steps:

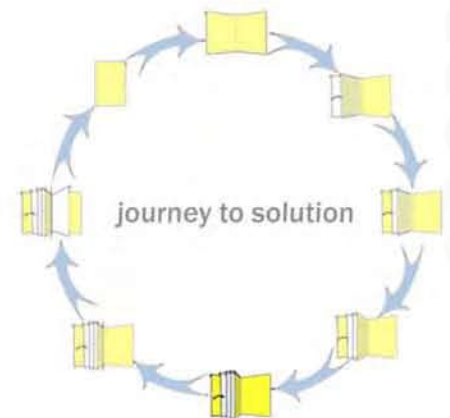
1. Identify current employee's skill levels

Two different generations of employees:

- a. Young generation who are mostly familiar with new technology.
- b. Older employees who may be less familiar with new technology.
These are the people that we need to be focusing the most.

Our goal

To determine their computer skills before implementing the EMR



2. Bring everybody up to necessary system's skill level

a. Define a system for measuring the progress:

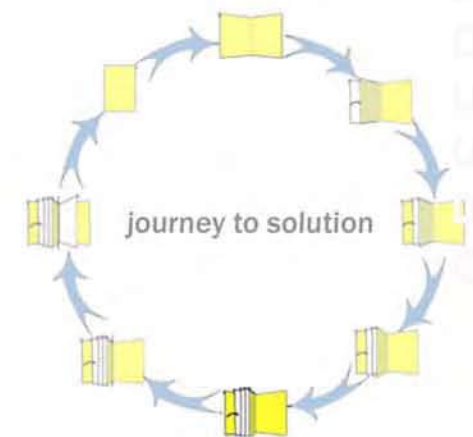
Developing benchmarks in order to screen and forecast computer literacy of the team.

b. Identify group leader:

Leaders are recognized base on tests.
Leader would be responsible for tracking team's progress based on designed measurements.

c. Creating a study group:

Defining projects for each group in order to reach better learning results.
Projects are designed based on the Computer literacy syllabus.



Steps to Create Good Training:

a. Planning is the Key:

Be Aware of the office culture.

b. Address the human side:

If there is any resistant from the employees, it will cause the new system to fail

c. Start at the Top:

Get employees to involve, and choose leader who is familiar with the system.

d. Involve every Layer.

e. Make the formal case:

All of staff needs to understand why EMR is more beneficial to the organization in written format.

f. Speak to the individual

To become aware of employees concerns about EMR program.



How do you determine a person's computer skills?

a. create a set of basic questions about computer

Syllabus of computer skills test:

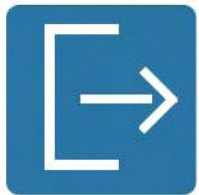
- Keyboard usage
- Windows
- Computer Settings
- Emailing
- Computer Software
- Computer Hardware and Networking
- Internet

b. Practical tests on computers





Log In



Log out



Log In

Full Name:

John S

Please type the following sentence:

Have a good day!

Have a

Visit 1

Visit 2

Visit 3



Injection ▼

Description: *Flu shot*

Test ▼

Description: *Blood*

Select and option ▼

Description:

Select and option ▼

Description:

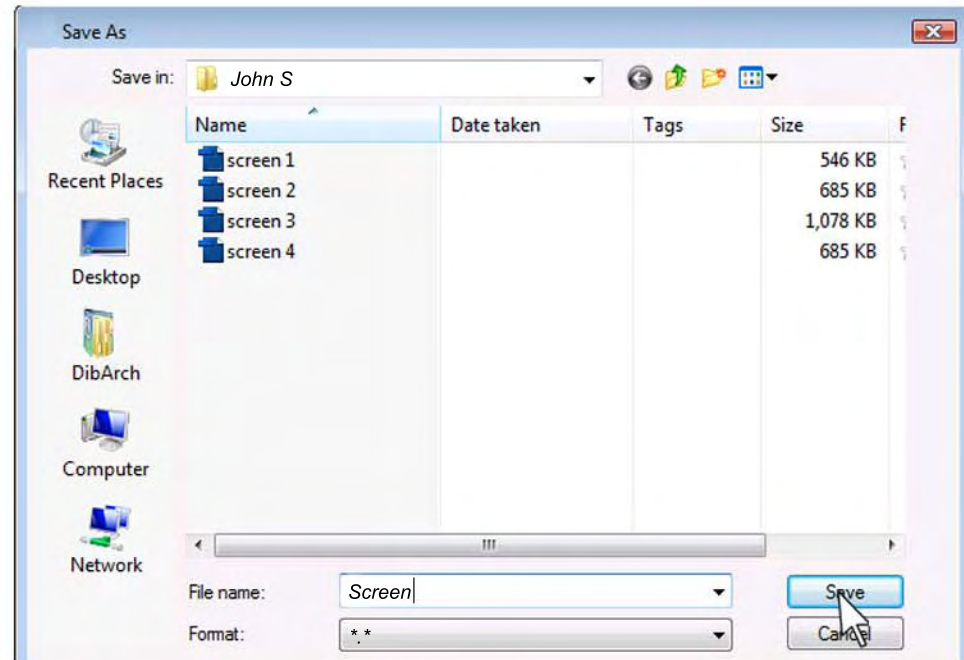
- Injection*
- Prescription*
- Drugs*
- Appointment*
- Blood Sample*

 Log out

Do you want to save your records?

Yes

No



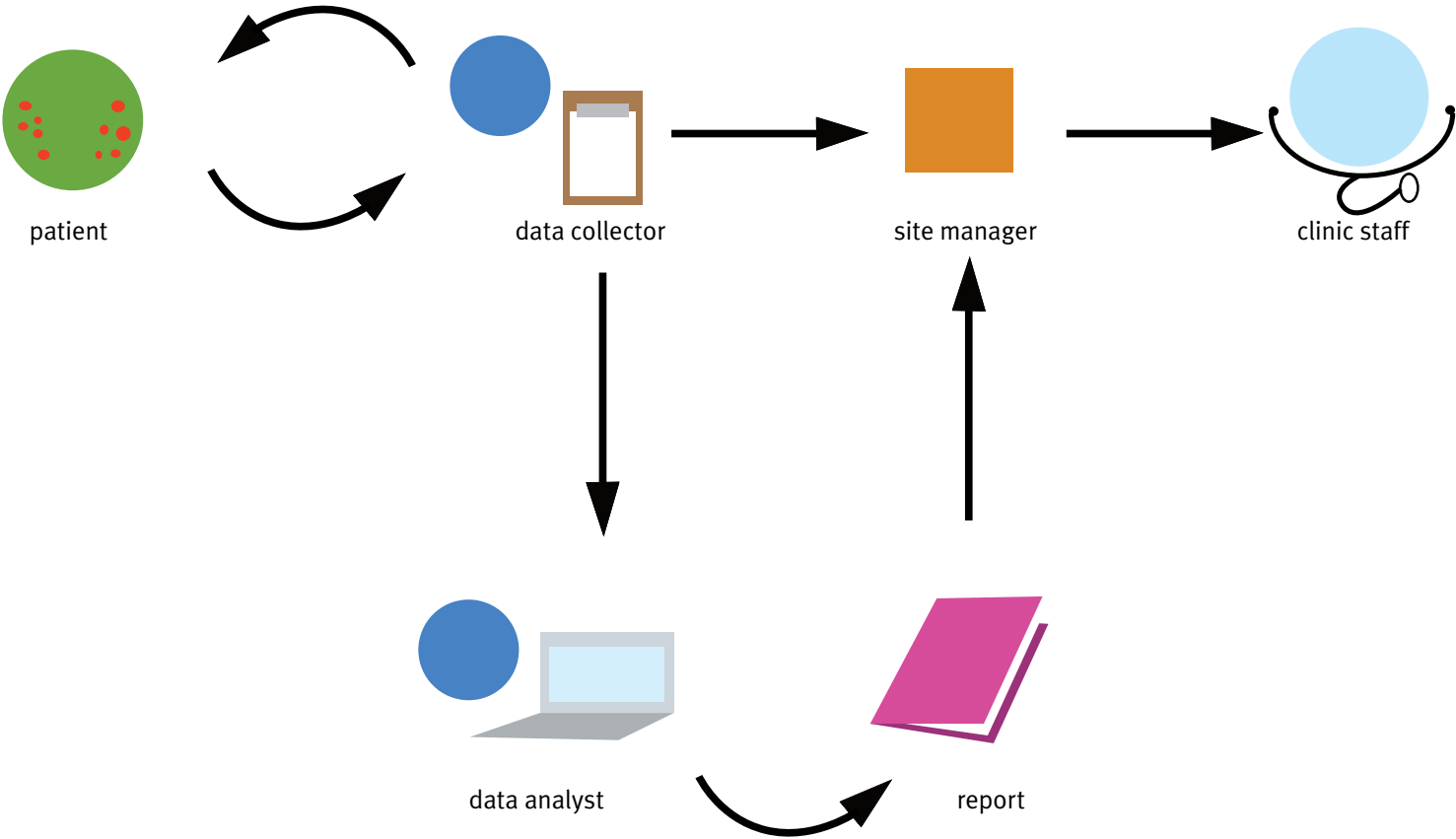


While an electronic medical record system is believed to improve patient satisfaction rate in variety of ways, there seems to be resistance toward it.

Our proposal tries to pave the way for staff and doctors toward adapting the new electronic system which is planned to be integrated in their future.



current process



problems with quantitative data

ACCESS COMMUNITY HEALTH NETWORK
Caring. Committed. Connected.

Date: 4/16

Patient Satisfaction Survey

We would like to know how you feel about the services we provided to you **TODAY**. Your responses will help us improve our services.

All responses are kept confidential. Thank you for your time. ✓ 0-30

Date: _____

Health Centers Name: _____

Doctor Seen Today: _____

Please circle: New Patient (or) Established Patient

Please circle: Appointment (or) Walk-In

Please circle age of Patient: _____

Number of times visited this health center? 0-3 4-6 7+ *+ 3 only improved hrs*

Have you ever filled out this survey before? Yes (or) No *+ 3 only improved hrs*

How did you hear about our clinic? Newspaper Article Friends Relatives

Other: _____

Is there anyone that you would like to recognize today for their service?
Name: _____

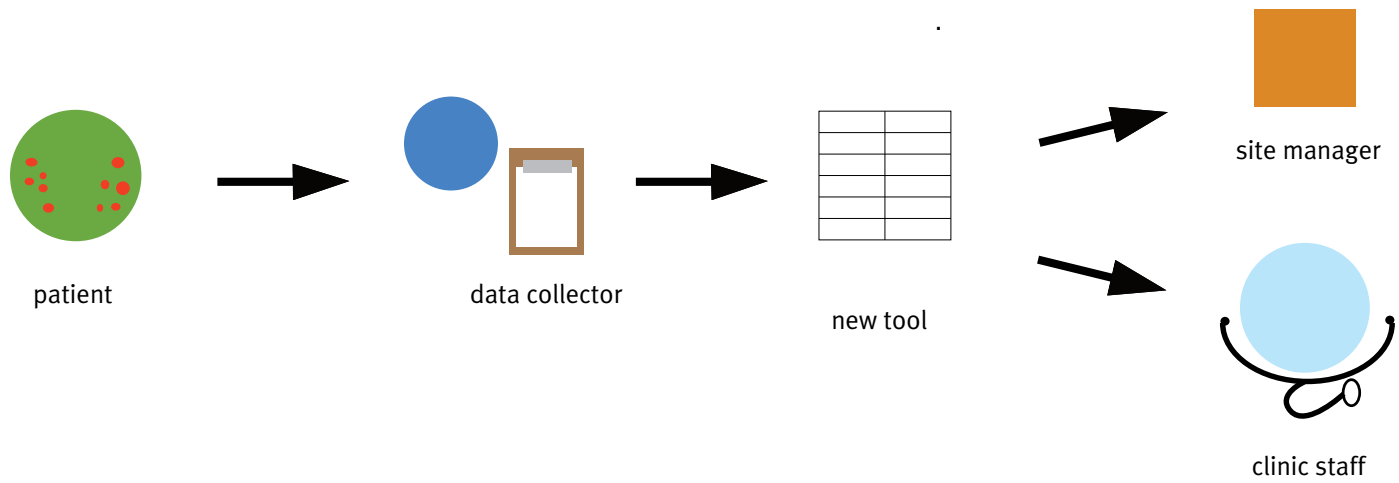
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5. Give us a score on the timeliness of answering your phone call.	5	4	3	2	1	N/A

1 of 2 * not circle on 5. emphasize give a comment for improving

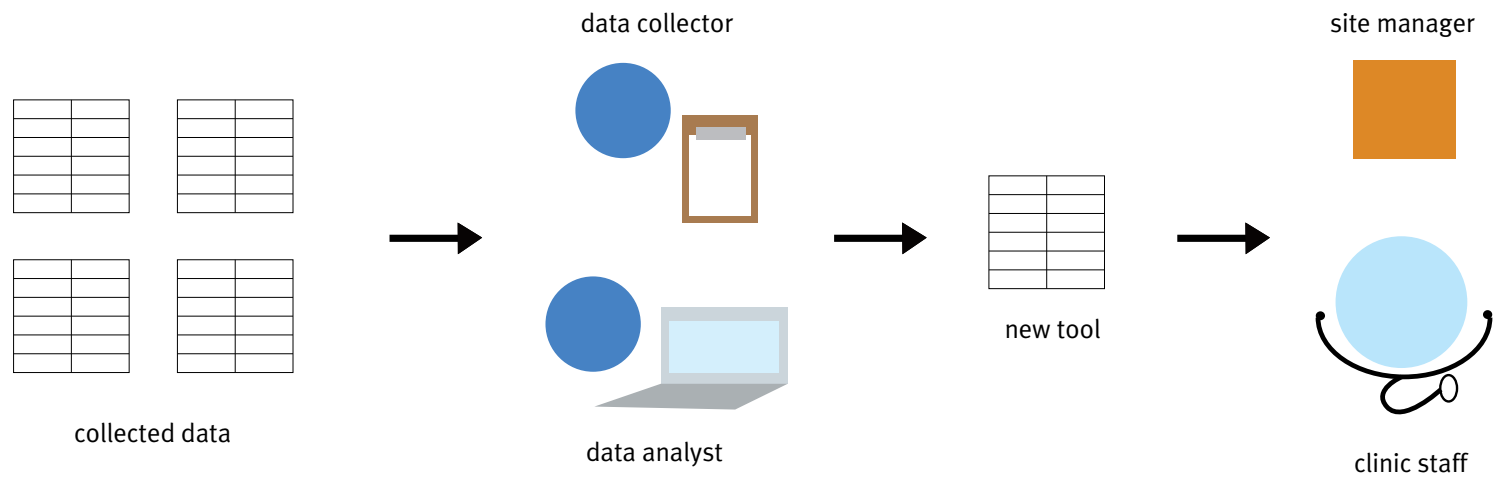
prototyping
alternative methods



new model
part one: immediacy



part two: over time



Questions?