

## Project Plan – IPRO 340 – Fall ‘04

### **PROJECT BACKGROUND:**

Our sponsor is ACCESS HealthCare, which is an organization with over forty different community health centers in Chicago. Thirty-three of ACCESS’s health centers have a perinatal treatment program, which is one of the greatest generators of revenue for ACCESS. The perinatal treatment program is inclusive of treatment for women from the time they walk in and test positive on their pregnancy test, through their nine months of pregnancy, and until their child is two years old. Although the perinatal treatment program is successful in generating revenue, it could be more successful and efficient in several ways. First of all, most of the ACCESS health centers are affiliated with Mt. Sinai Hospital, and almost all ACCESS patient deliveries take place at Mt. Sinai hospital. However many women do not return to Mt. Sinai to deliver their babies, causing ACCESS to lose revenue. Next, some women take their UCG (pregnancy urine dipstick test) at ACCESS health centers, and even when they test positive, they do not return to ACCESS for their prenatal care. Also all of the patient’s information is recorded and stored manually in logs; however, this system is inefficient and outdated. Other than that, the perinatal treatment program is quite effective and successful. We will be evaluating the perinatal treatment program at ACCESS’s Grand Boulevard site.

### **PROJECT OBJECTIVES:**

Our objective as a team is to evaluate ACCESS Community Health Care’s perinatal treatment program and suggest and implement improvements to the program. Currently the treatment program has issues in that the technology is not up to par with their treatment program, and many women are not returning to ACCESS healthcare after receiving the initial pregnancy test, which causes ACCESS to lose revenue. Our objective is to analyze the whole perinatal care model and see where they are losing patients and attempt to bring these patients back into their system. Another objective is to improve the technology of ACCESS healthcare in whatever way we can, so that they will be more efficient in their treatments and can readily access information.

### **STEPS TO ACHIEVE THIS GOAL:**

**Step 1:** Understanding the current *theoretical* healthcare system at the Grand Boulevard Access Health Care facility.

**Involves:** General Research  
Site Visits  
Interviewing Management (Steven Glass, Angela Ellison,  
Site Managers, IT experts)

**Product:** 7 Flow Charts that will fully describe the *intended* system:

*Chart 1* – Grand Blvd Prenatal Flow Chart – (Group 1)  
(time of contact to Mt. Sinai transfer)

Chart should include any information pertinent to the design of their current system: Entire process from first contact with the patient until the day of delivery.

*Chart 2 – Documentation of Prenatal Care – (Group 2)*  
(time of contact to Mt. Sinai transfer)

Chart should show the information that is taken from patients at each step, where it's stored, and both how and when it's accessed later. This chart will be based off of the Prenatal Flow Chart (1).

*Chart 3 – Flow chart of the Meditech System – (Group 2)*

Chart should map out and describe the capabilities of their current technology system. This will be later used to determine if their current system will be sufficient for implementing changes.

*Chart 4 – Mt. Sinai Prenatal Care Flow Chart – (Group 3)*  
(time of transfer to Mt. Sinai for care)

Chart should map out what should happen when the patient arrives at Mt. Sinai for labor.

*Chart 5 – Mt. Sinai Information Flow Chart – (Group 3)*

Chart should show what information is stored where, how it's accessed, when it's accessed, and when an information transfer should take place between Mt. Sinai and Access.

*Chart 6 – Grand Boulevard Post-Labor Care Flow Chart – (Group 1)*

Chart should show what steps are supposed to be taken for follow-up care after the birth.

*Chart 7 – Grand Boulevard Post-Labor Information Flow – (Group 2)*

Chart should show how information is transmitted back to Grand Boulevard from Mt. Sinai after the birth and what additional information is required for both the mother and the child after birth.

Step 2: Understand what's *actually* happening at the Grand Boulevard Access Healthcare facility and what is lacking.

**Involves:** Patient Surveys  
Employee Surveys  
Research of Alternate Care Systems

**Product:** New set of flow charts with additional lists of missing components

- Step 3: Compare the flow charts and mark and *Identify the Problems*.  
This will be easy because we will have it all in front of us.
- Step 4: Identify the common sources of these problems. (i.e. the most severe problems)  
Decide which problems to attack.
- Step 5: Reassign subgroups to attack problems
- Step 6: Brainstorming sessions on how to fix problems
- Step 7: Work on Solutions and implementing solutions
- Step 8: Test Solutions and see if we improved ACCESS healthcare in any way

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Step ?: Prepare presentation, exhibit, abstract...etc. for IPRO day.

### **EXPECTED RESULTS:**

Currently, our only deliverables that we know of are our flowcharts for each subteam. Our final product will depend on our findings from our flowcharts. Based on the problem we choose to attack, our deliverables could range from a website providing a virtual tour of Mt. Sinai's labor and delivery unit to a system that automates the manual log books. However our only result for certain is that whatever we do, we hope that it will improve the quality of care ACCESS provides at its community health centers.

### **PROJECT BUDGET:**

Currently, we are not sure of our expenses as we do not know what our final product will be. As far as our research goes, we do not have any expenses; however, once we decide on our final product, our expenses could range from nothing to a PDA to store a system on. We will develop our budget as the semester goes on.

### **GROUPS:**

- Group 1 – Prenatal Care Group: \*Joanne, Karla & Parinda  
Group 2 – Information Technology Group: \*Suman, Dhaval, & Jason  
Group 3 – Mt. Sinai Group: Armando, \*Pooja, & Jesse  
\* Indicates Group Leader

Team Leader: Parinda

Currently we have not yet assigned any tasks individually, and we are uncertain of our milestone events, as our only known deliverables are our flowcharts. The Prenatal care group will be in charge of the Grand Blvd prenatal flowchart and the Grand Blvd Post-Labor flowchart. The information technology group will be in charge of documenting the information flow on the flowchart for the prenatal care and post-labor care. Finally, the Mt. Sinai group will be in charge

of the two Mt. Sinai flowcharts. Work will assigned by subgroup leaders as we find more information about our problem. Pooja will take the minutes of the meeting and Joanne will compile the weekly reports of all team members into a concise form. Parinda will organize meetings and create agendas. The subteam leaders and the team leader will ensure that all members have enough work each week.