

WORKFLOW MAPPING AS A TOOL FOR ORGANIZATIONAL CHANGE

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LEARNING OBJECTIVES

- Describe the workflow mapping process.
- Identify key elements in a workflow map.
- Verbalize the Do's and Don'ts of Workflow Mapping
- Describe the workflow mapping as a tool for organizational change.

ACKNOWLEDGEMENTS

- Evaluation and Technical Assistance Center at UCSF-Center for AIDS Prevention Studies
- Stephen Bromer, MD & Sarah Colvario, MS
Transforming your practice: workflows, responsibilities, training competencies.
- Ruth M. Rothstein CORE Center Administration and Staff
- HRSA SPNS



Ruth M. Rothstein CORE Center: Chicago, IL

- Cook County Health and Hospitals System – Public “Safety-Net” Facility
- >5,000 active patients, >25,000 primary care visits annually
- It is estimated that we provide care to 30-35% of PLWA’s known to be in care in Chicago and 205 pf PLWHIV’s known to be in care in Illinois
- 63% African American and 23% Hispanic/Latino
- Male 74% Female 26%
- >90% have incomes less than 200% FPL
- *Frequent history of drug use, incarceration*
- *One-stop shopping model/wrap-around services*

WHY DO A WORK FLOW MAP NOW?

- ❖ HIV is now a chronic disease.
- ❖ The chronic care model “changes the daily practice of chronically ill patients through a combination of: *effective team care and planned interactions; self-management support increased by an effective use of community resources; integrated decision support; and patient registries and other supportive information technology.*”
 - ❖ *Patient Centered Medical Home*

K. Coleman, B.T. Austin, C. Brach, and E. Wagner, “Evidence On The Chronic Care Model In The New Millenium”, *Health Affairs*, Volume 28, Number 1.

What is a workflow map?

- ❖ Creating a visual representation of a process
 - A process is a series of actions, steps, or tasks performed in a certain order to achieve a given result
 - For example: answering the phone, doing prescription refills, documenting vital signs, or filling out billing forms
- ❖ Defines the beginning of a process, the end of a process, and all the steps in-between
 - Defines what *is*

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What is a workflow map?

- ❖ Workflow mapping is a way of **making the invisible “visible”** to a practice so they can look for ways to improve their processes to **increase efficiency, reduce errors, and improve outcomes.**
- ❖ Creating a workflow map enables you and the practice to **see what is currently happening, identify opportunities for improvement or change, and design new, more effective processes.**

[Agency for Healthcare Research and Quality:](http://www.ahrq.gov/professionals/prevention-chronic-care/improve/system/pfhandbook/mod5.html)

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What does a workflow map look like?

- Symbols represent steps
- Steps are put in order



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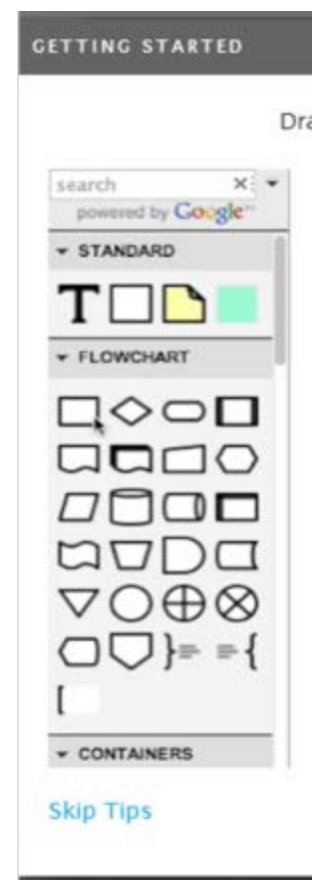
Know your symbols

Note: There are ~4-6 commonly used/recognized symbols. If you use others or have custom symbols, mark their meaning.



Visio (PCs only, software)

Lucid Chart (free, some limitations)



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Types of workflow maps

High-Level Flowchart: Shows the major steps of a process. A high-level (also called first-level or top-down) flowchart illustrates a "birds-eye view" of a process.

Detailed Flowchart: Provides a detailed picture of a process by mapping all of the steps and activities that occur in the process. This type of flowchart includes such things as decision points, waiting periods, tasks that frequently must be redone (rework), and feedback loops. This type of flowchart is useful for examining areas of the process in detail and for looking for problems or areas of inefficiency.

Detailed Flowchart of Patient Registration



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Why bother with workflow mapping?

Workflow mapping helps practices

- Identify barriers to getting the work done (safety)
 - Eliminate wasteful steps
 - Streamline complicated workflows
 - Standardize how work is done
 - Provide better care to the patient
-
- Workflow mapping helps guarantee the success of your Practice Transformation Model implementation

Workflow mapping in action

Doing an initial workflow shows:

- problems in the current system
- differences between what's supposed to happen and what does happen
- how the practice might do it better.

RMR CORE Center

- 14 clinics per week
- Multi-disciplinary Team
 - Resource Attendings, Medical Providers, Case Management, Chemical Dependency Counselors, Clinical Pharmacist, Mental Health Providers, Care Managers, Charge Nurse, Staff Nurse, Triage Nurse, Medical Assistants, Peers, Health Educators, Nutritionist, Scheduler, Registration Clerks
- 50-60 patients per 3.5 hour clinic sessions
- Average of 7 medical providers per session

What challenges have you encountered with the process of workflow mapping?

- Logistical-space, day and time of meeting
- Identifying correct staff members
- **Managerial presence effect on staff.**
- Availability of staff
- Buy-in

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It Depends ...

S

What challenges have you encountered with the process of workflow mapping?

- Not accepting reality
- Moving into fixing issues
- Why are you/we doing this?
 - **Staff defensiveness regarding process**

Pitfalls of workflow mapping

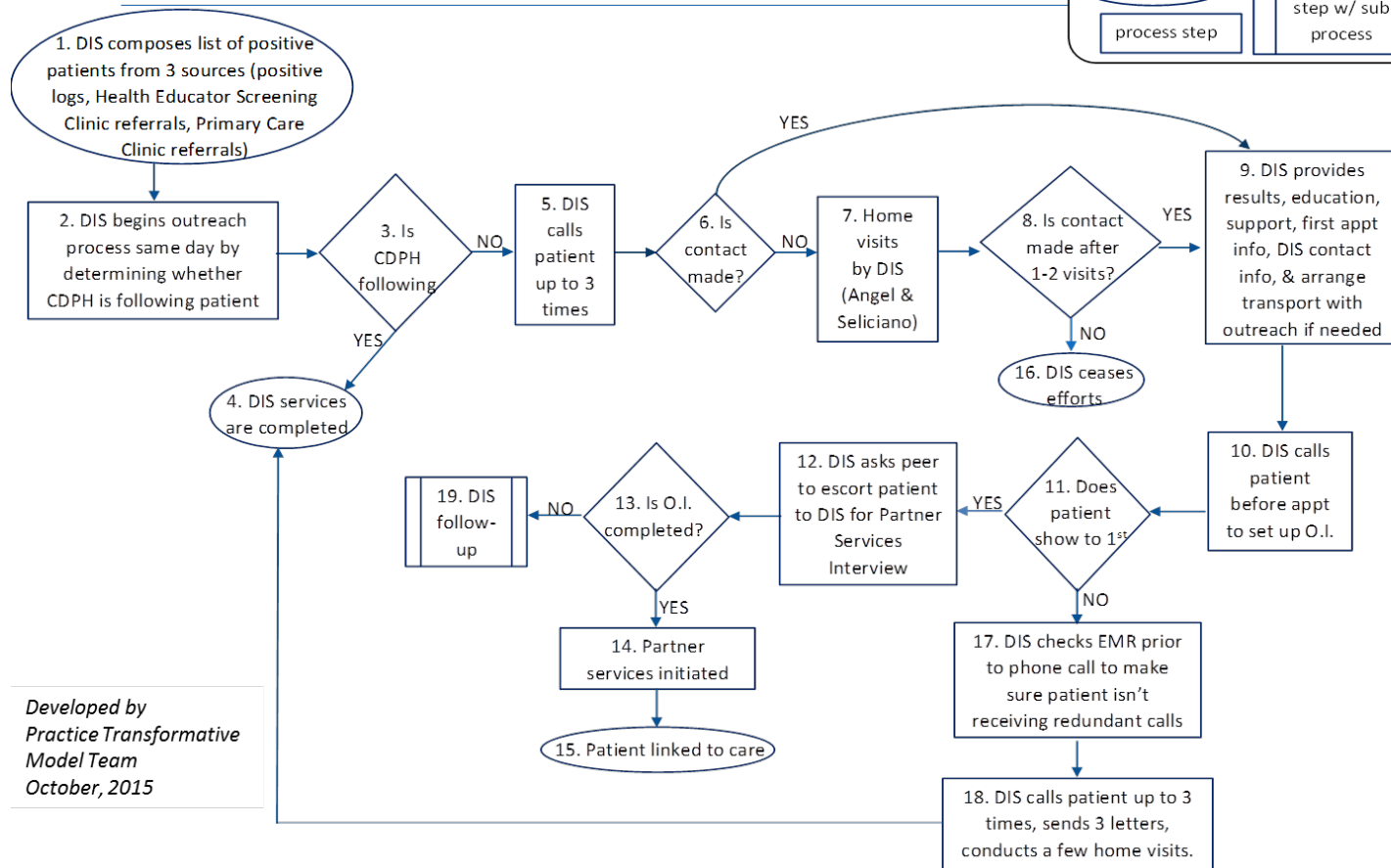
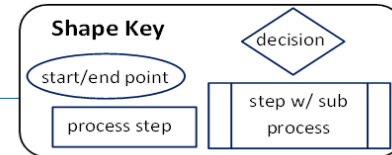
- Mapping out the processes you *wish* you had
- Interviewing only a few key informants instead of shadowing everyone involved in the process
- Ignoring the opinions of those who know the process best
- Putting your workflow map on the shelf and never looking at it
- Creating a workflow map in isolation of staff/clinic operations
- Jumping straight to the task of workflow mapping instead of explaining the benefits and rationale for improvement

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DIS Workflow

DIS – Disease Intervention Specialist
CDPH – Chicago Department of Public Health
O.I. – Original Interview

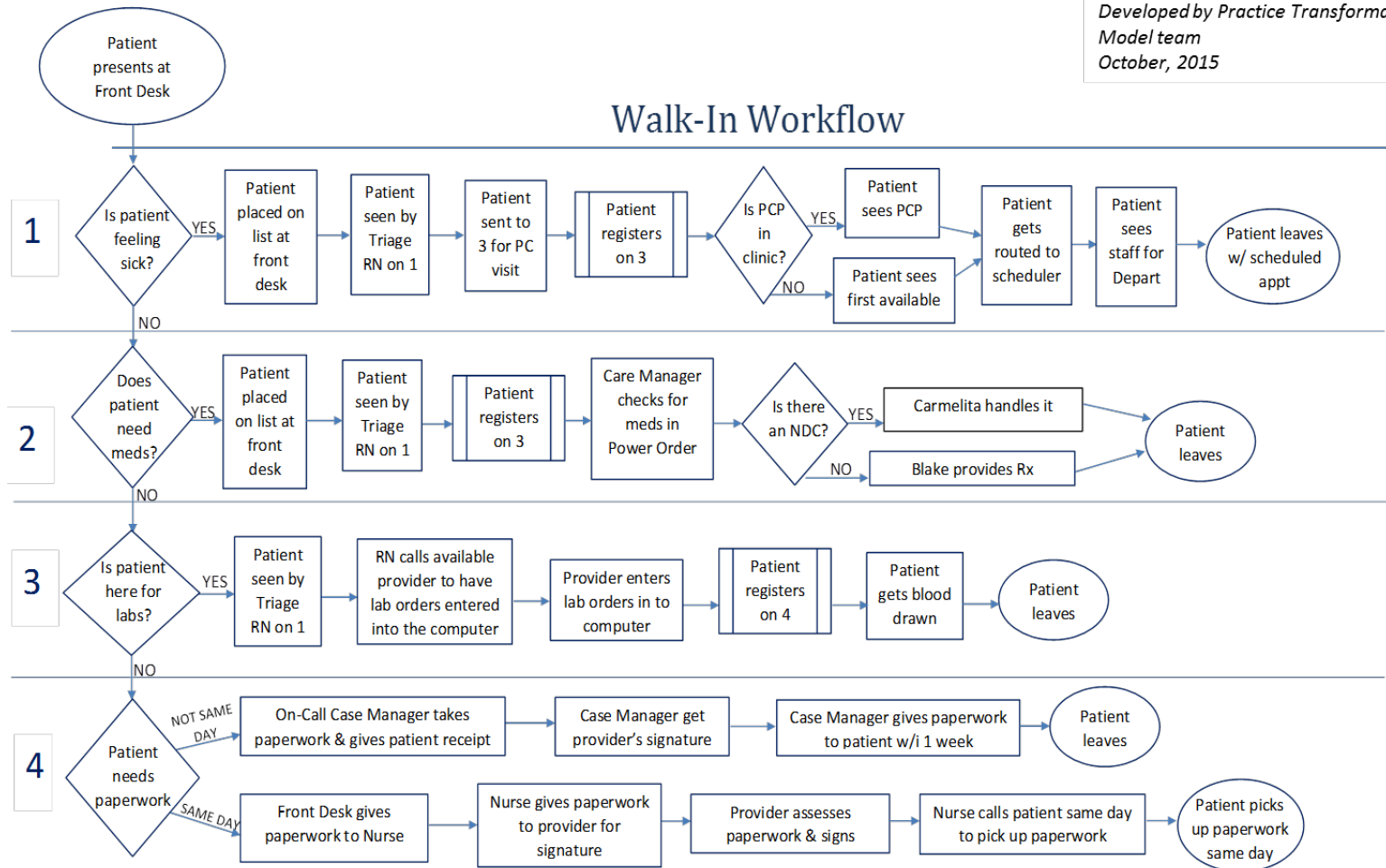
DIS Workflow



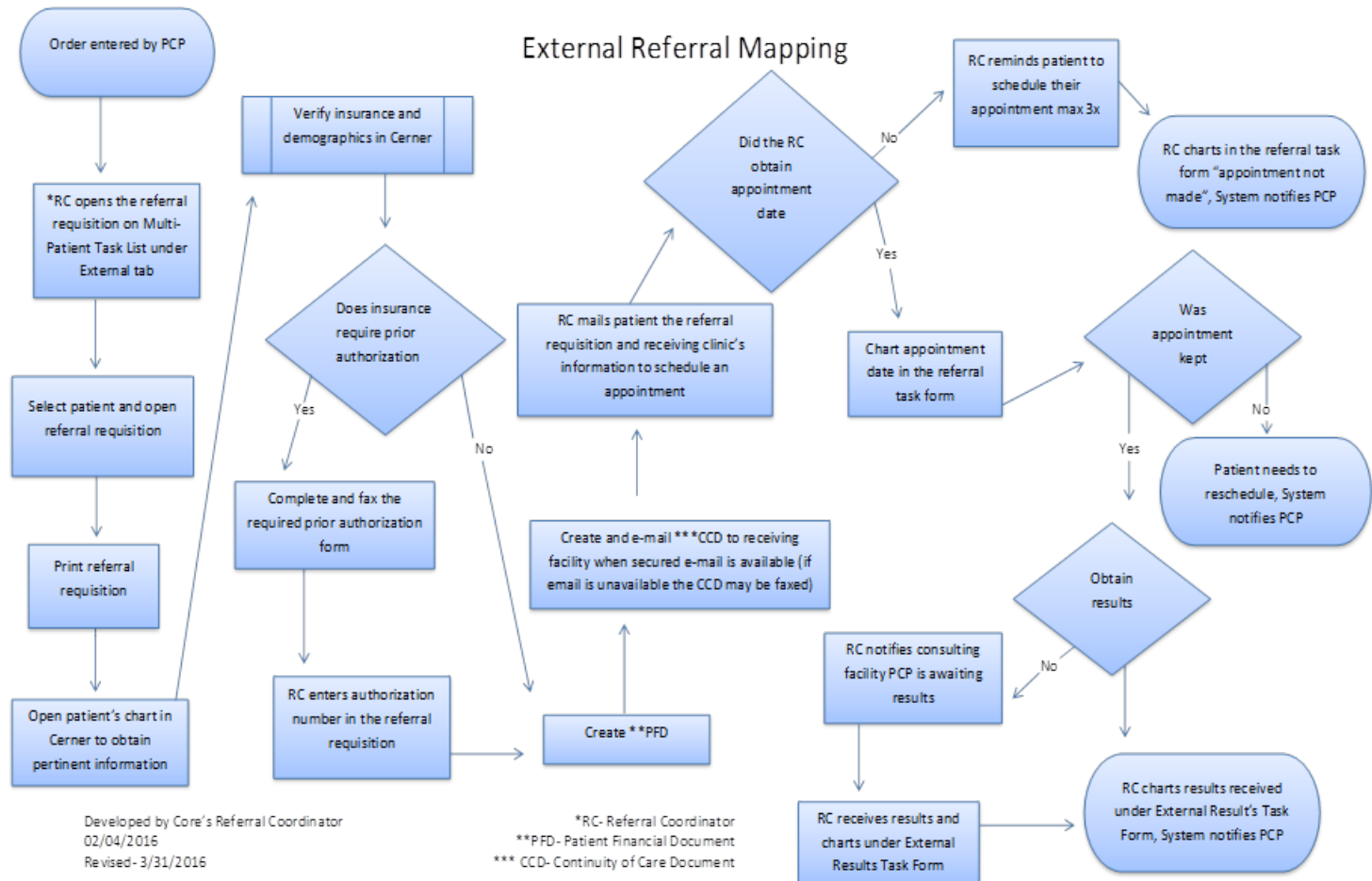
Developed by
Practice Transformative
Model Team
October, 2015

Walk-In Workflow

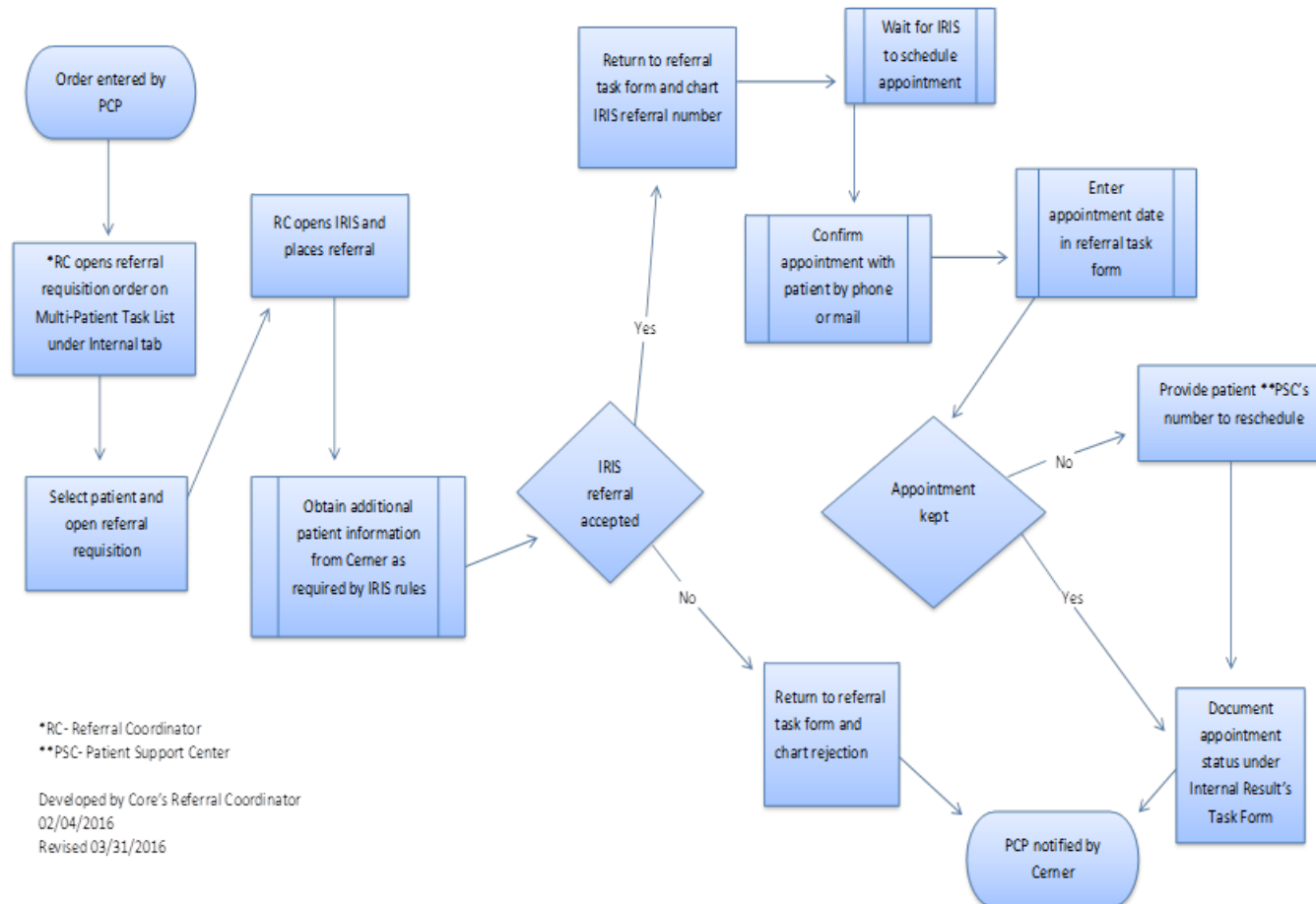
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External Referral Mapping



More mapping ...



Developed By: RMR CORE Center Care Managers and MAs

What challenges have you encountered with the process of workflow mapping?

- Logistical-space, day and time of meeting
- Identifying correct staff members
- Availability of staff
- Buy-in
- Not accepting reality
- Moving into fixing issues
- Why are you/we doing this?

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The Link

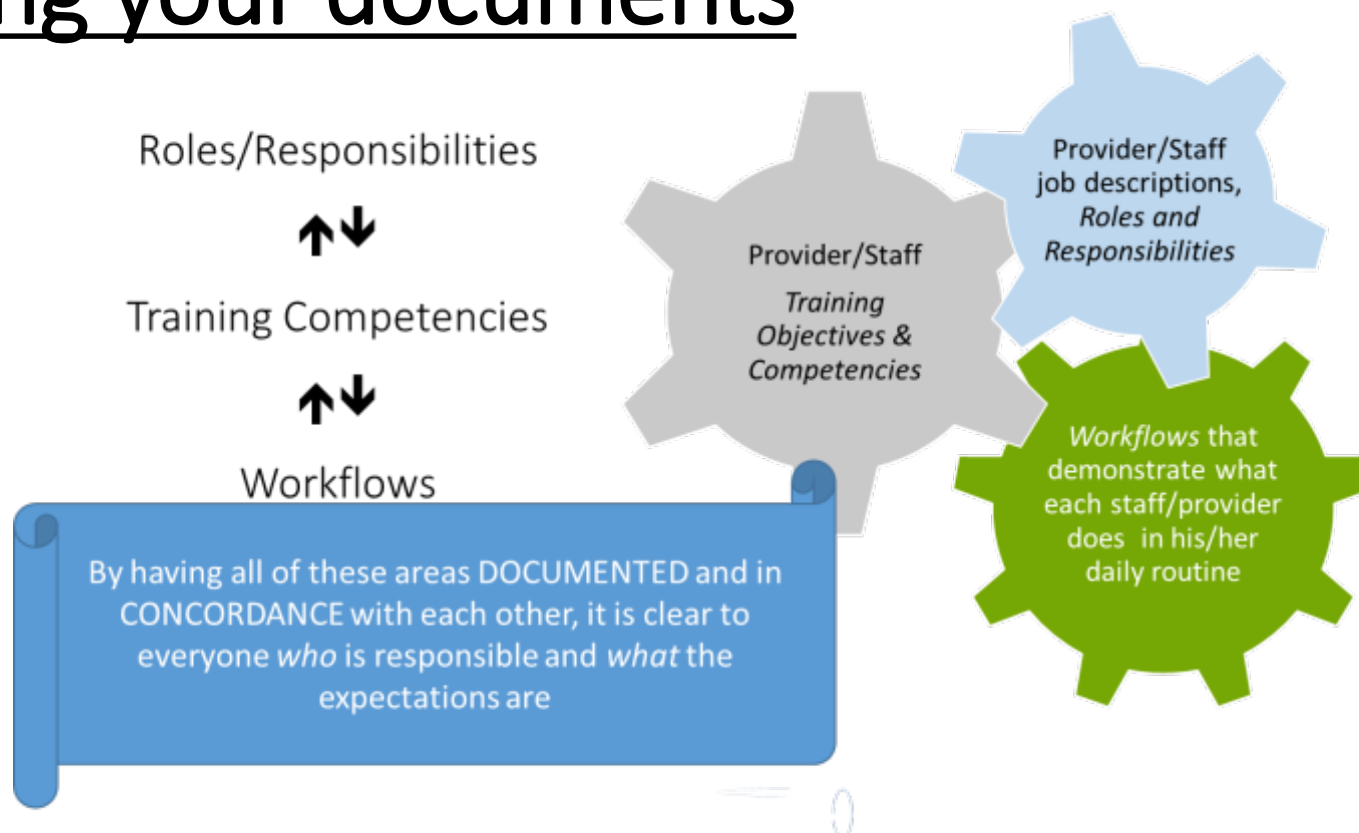
Make sure that you **establish** how established or new workflows impact

- Responsibilities
(and in some cases roles or job descriptions) of care team members
- Training of care team members
- Skills checks/performance review of care team members

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Take-Away:

Linking your documents



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Take- Away: Steps for workflow mapping

Step 1. Choose:

- A process to map out
- Level of detail (remember: high level means less detail!)
- Type of workflow to use (traditional or swimlane)
- Person to draft the workflow

Step 2. Determine the beginning and end points

Step 3. Identify each step in the process

Step 4. Put the steps in order

Step 5. Review and edit the first draft

Step 6. After a day or two, review the flowchart with the team for input

Remember: it
may be easier to
draft using paper

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Take-Away: Improves Transparency

Workflows...

- ❖ are how you document a process – a series of steps. You can see what you do now and identify how to improve.
- ❖ help clarify who is responsible for tasks
- ❖ help identify key competencies and plan for how you are going to train and assess care team members

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Take-Aways and Challenges:

- ❖ Work flows are a quality improvement investment
- ❖ There are pitfalls to watch out for
- ❖ These are working documents (with established pre-implementation and final versions).

Benefits of Workflow Mapping

❖ Staff benefits

- Redundancy is eliminated
- Processes are simplified
- More aware of their own jobs and their colleagues' job
 - When training/supervising staff, gives concrete job expectations

❖ Patient benefits

- Encounter fewer delays
- Ideally fewer staff encountered for a single task
- Receive better care

❖ Everyone benefits

- Happier (we hope!)

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Everyone Benefits & Can Be Happier

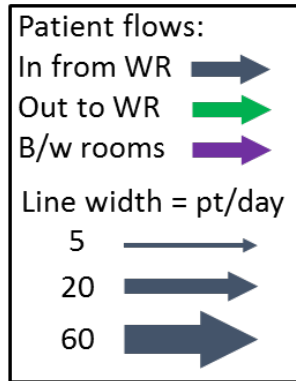
What does this really mean?

- New positions
- Revamping old positions
- Deployment of current staff
- Development of new departments and/or areas
 - Access Line
- Identifying new resources
- Developing new processes
- Developing new policies
- New trainings/cross trainings

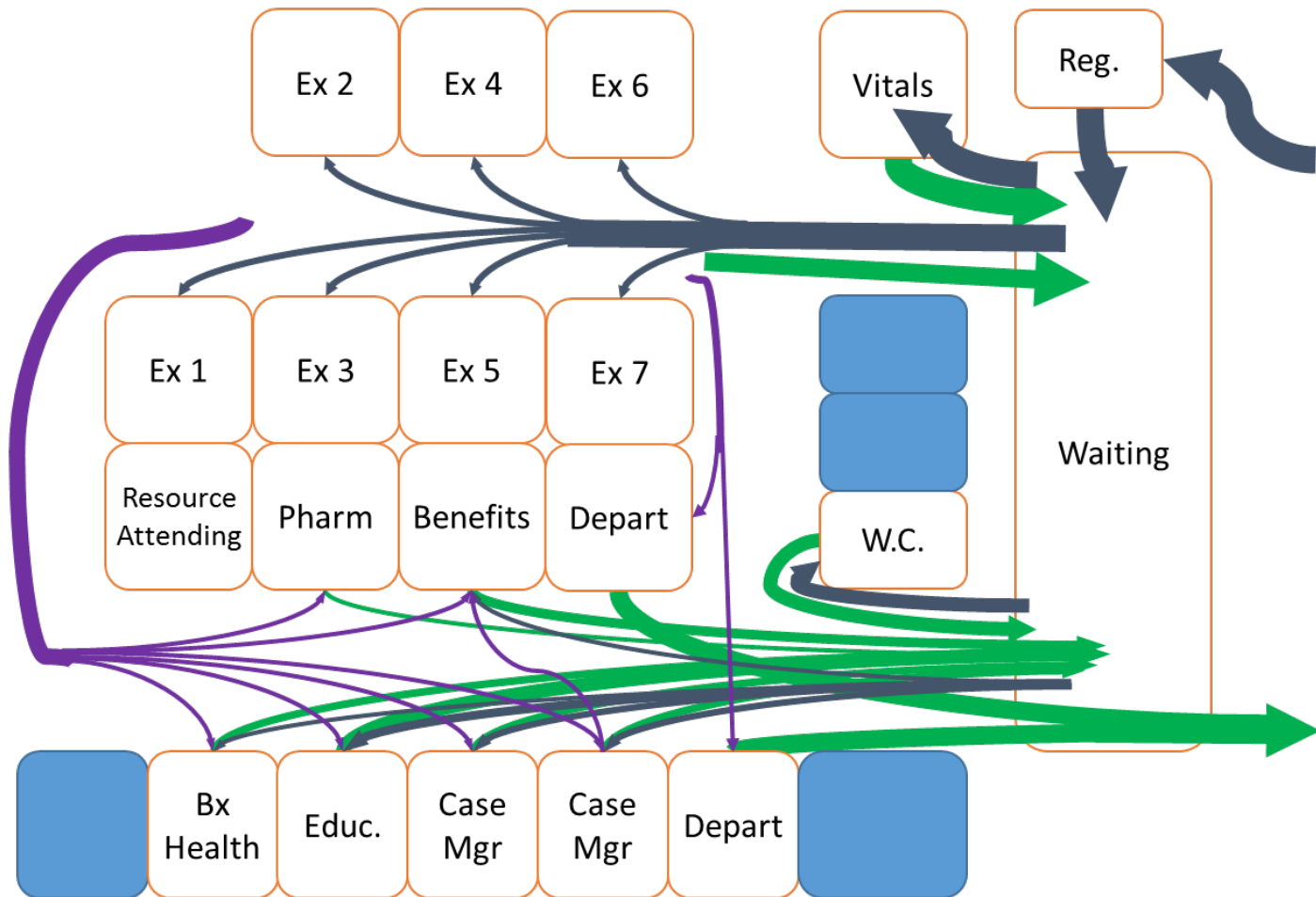
There is an Opportunity here to Improve Patient Experience

- We are doing this because the organization needs to:
- Improve the Patient Experience--- by---
- Enhancing Our Current Process
- Becoming More Efficient

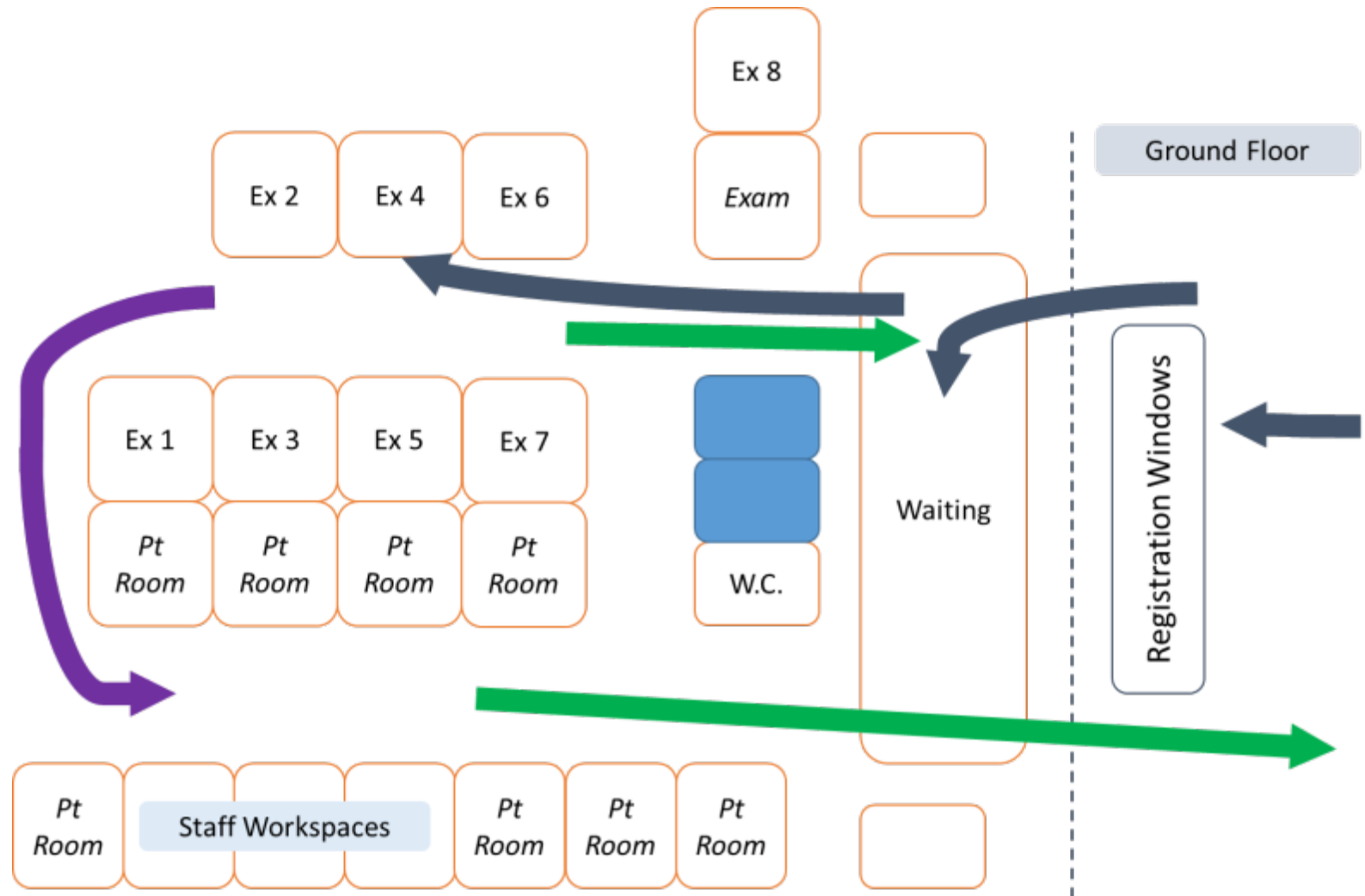
Patient Flow in Primary Clinics



Patients move an average of 8 times per visit



Ideal State Patient Flow in Primary Clinics



EXERCISE AND QUESTIONS

Break out groups with easels

- Identify one organization at table
- Identify a current flow
 - Walk-ins
 - Medication refills
 - Registration
 - Outreach
 - New patient appointment
- Develop a workflow map of current process
 - If time permits, identify possible solutions
- Presentation back to group

Parting Thoughts

I can't change the direction of the wind,
but I can adjust my sails to always reach
my destination.

Jimmy Dean

Go forth and
conquer!

THANK YOU!!!

