Implementing a New Patient Flow Management System at the Addiction and Substance Abuse Program (ASAP)

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INTRODUCTION

ASAP (Addiction and Substance Abuse Program) is an Interdisciplinary clinic

- 870 patients
- Methadone Dispensary
- Patient Panels for counseling, psychiatry, primary care, case management
- Walk in Clinic (urgent care), no appointments required M-F 8am-2pm
- 6 Clinic Rooms
- Until recently walk-in clinic’s high volume patient flow was managed with TigerConnect Message thread

RESULTS

- Initial Interventions
  - Request IT to reconfigure ASAP’s virtual structure to match its physical layout to make a FirstNet Track board possible
  - Replace TigerConnect thread with FirstNet Tracking board

FUTURE DIRECTIONS

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ROOT CAUSE ANALYSIS

The 5 Whys

Problem 1: Providers do not know where the patients are

Why: Tiger Text thread only indicates when patient arrives and is roomed, room number not provided
Why: Sometimes patients need to be moved for various reasons and constant updating of the room number is time consuming for busy clinic staff
Why: Just got used to using Tiger Text
Why: ASAP lacks a dedicated software for patient flow management

Problem 2: ASAP lacks dedicated software for patient flow management

Why: No one has ever implemented one
Why: Well actually, previous attempts to use FirstNet for patient tracking were unsuccessful
Why: FirstNet designed to track patients across multiple locations, ASAP operates as a single location
Why: ASAP’s virtual structure on Cerner Oracle Health Record does not accurately reflect its physical layout, which has multiple spaces (6 clinic rooms)

DISCUSSION

- FirstNet tracking board was a necessary intervention to improve patient safety and privacy and increase provider efficiency by reducing interruptions
- Overall satisfaction was much higher than expected
- Majority of users of new system have not yet been polled, early sample size small
- An intervention initially thought to be impossible required understanding Cerner’s fundamental architecture
- Clarity was not provided to front desk staff that the new FirstNet board is only for the ASAP walk-in clinic

NEW PROCESS MAP

- Next PDSA cycle to include:
  - Consultation with front desk staff for feedback.
  - Counter measures: Patient wait time
  - Overall patient time spent at the clinic
  - Total patient time spent at the clinic
  - Total patient time spent at the clinic
- Introduce training documents and/or videos designed specifically for each role
- Continue collecting satisfaction data from all clinic roles
- Collaborate with IT to identify other inefficiencies in clinic flow that may have virtual architecture-based barriers

Sample of Reasons Provided for Respondents' Satisfaction Ratings

Attending: "Tracking board makes it easier to supervise the walk-in clinic"

Learner: "Being able to write comments of what is being worked on, and visually being able to see who everyone on the team is working with allows for the clinic to work more efficiently and harmoniously"

Front Desk Staff: "FirstNet has been a pain for the front desk staff if the patient is checking in for multiple appointments on the same day in the ASAP clinic it looks the patient off of first net... it may be helpful for the medical staff [we] do not know the benefits on the clinical side."