

# 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

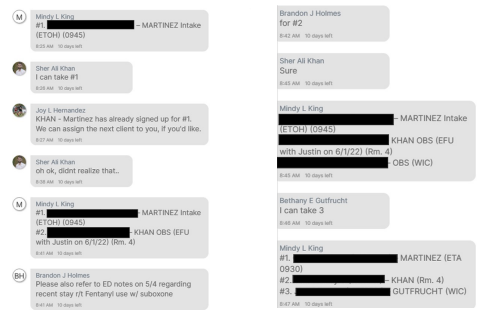


Figure 1. TigerConnect Message Thread for patient flow management

### Challenges:

- 1) Requires constant checking (interruptions) as updates are made to thread
- 2) Information can be easily missed if thread continues to grow
- 3) Does not specify which room patient is in

## 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 is seen virtually a single space on Cerner Oracle Health Record
- Why: ASAP's virtual structure on Cerner Oracle Health Record does not accurately reflect its physical layout, which has multiple spaces (6 clinic rooms)

## INTERVENTION

### 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

Figure 2. New FirstNet Tracking Board for ASAP Walk-In Clinic

## NEW PROCESS MAP

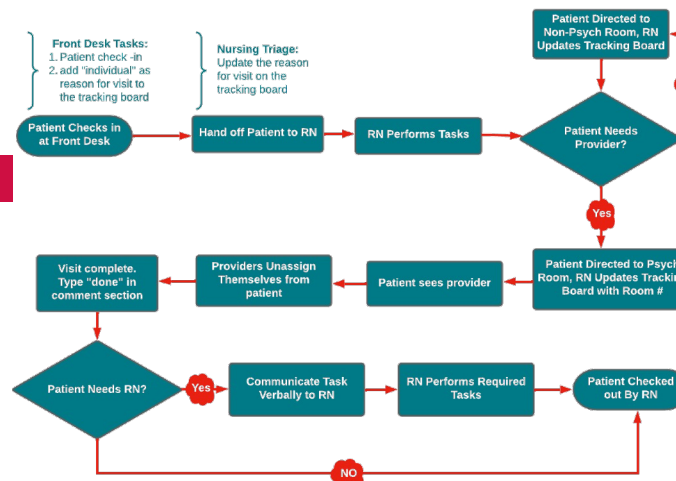
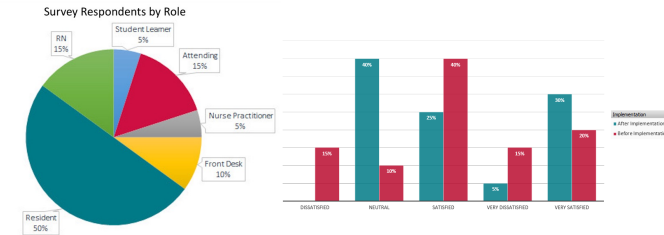


Figure 3. New Process map for FirstNet patient flow manager

## RESULTS



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 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 at the ASAP clinic it kicks the patient off of first net...It may be helpful for the medical staff [we] do not know the benefits on the clinical side."

## 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

## FUTURE DIRECTIONS

- Next PDSA cycle to include:
  - Consultation with front desk staff for feedback.
  - Counter measures: Patient wait time
- 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