WE HAVE A CLEAR VISION FOR
VALUE IMPROVEMENT
WE GROUND OUR IMPROVEMENT
IN A CLEAR BENEFIT TO OUR
PATIENTS

ORGANIZATIONAL CULTURE
OUR ORGANIZATION IS FOCUSED ON
IMPROVING VALUE
OUR ORGANIZATION IS FOCUSED ON
IMPROVING HEALTH CARE VALUE

OUR PHYSICIANS
ENGAGE IN AND LEAD IMPROVEMENT
The document is about the analysis and implementation of strategies to improve wait times at ST John's Urgent Care. It includes a brainstorming session to implement standing orders for UTI, sore throat, and flu symptoms. Two staff members were trained to be Super Users for the wait time report, and wait times were posted daily. Providers were reminded to document and analyze wait time data. A PI project was added for wait times, discussed quarterly at the PI Committee Meeting.

The waiting area was improved with iPads for check-out, television in the waiting room, coloring books/toys added, and increased magazines/flyers. Additional improvements include:

- Increasing provider working hours by 1 hour per day to have 2 providers at night.
- Implementing kiosks for check-in (stopped on 7/15/2015 due to duplicate entries).
- Changing the way providers update status when entering patient rooms.
- Adding an additional MD to the Urgent Care Team to staff 4 providers per day.
- Scheduling 4 providers on Mondays and Fridays.
- Implementing online booking of Urgent Appointments (to be initiated May 2016).
- Staffing 2 nurses triaging during busy times, cross cover stepping in during bottleneck.
- Designating Wait Time Project liaisons.

The program team and project scope include Kristin Irvine, R.N. (lead), Martin Trott, M.D., Joan Palmer, M.A., R.N., Mark Hettinger, M.P.A., all Urgent Care staff.

**Problem & Goal Statements**

Problems:
1. In July 2015, the average time to provider was 27.32 minutes.
2. Most recent CGCAHPS (Quarter 3) Score was in the 68th Percentile.

Goals:
1. Decrease arrival to provider time to less than 20 minutes for walk-in patients.
2. Increase CGCAHPS score for wait time to the 75th Percentile.

**Analysis & Investigation**

Implementation items from brainstorming session:
- Initiate standing orders for UTI, sore throat, and flu symptoms
- Train 2 staff members to be Super Users for wait time report
- Post wait times on a daily basis
- Remind providers to document
- Analyze wait time data and post daily
- PI project added for wait times
- Discuss quarterly at PI Committee Meeting

Added a status board in Nurses Hub to improve efficiency.

Increase wait time diversions:
- iPads for check-out, television in waiting room, coloring books/toys added, increased magazines/flyers.

**Improvement Design & Implementation**

- Increase provider working hours by 1 hour per day to have 2 providers at night.
- Implement kiosks for check-in (stopped on 7/15/2015 due to duplicate entries).
- Change the way providers update status when entering patient room.
- Add an additional MD to the Urgent Care Team to staff 4 providers per day.
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- Designate Wait Time Project liaisons.

**Impact**

- Staff report increased job satisfaction.
- Decrease time to MD to as low as 10 min with addition of 4 providers.
- Wait time reduction since initiation of project. July 27.32 min, Aug 23.41 min, Sept 20 min 59 sec, Oct 18 min 54 sec. Nov 20 min 62 sec, Dec 22 min 54 sec, Jan 21 min 24 sec.
- Increase wait time score to 74th% for Oct – Dec 2015.

**MEASURES & MONITORING**

<table>
<thead>
<tr>
<th>Type</th>
<th>Measure</th>
<th>Baseline</th>
<th>Goal</th>
<th>Jul-Sep 2015</th>
<th>Oct-Dec 2015</th>
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<tbody>
<tr>
<td>Quality</td>
<td>Decrease in arrival to provider time</td>
<td>27.32</td>
<td>&lt;27.32</td>
<td>22m48s</td>
<td>28m56s</td>
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<tr>
<td>Service</td>
<td>Improve CGCAHPS wait time patient satisfaction score</td>
<td>60%</td>
<td>75%</td>
<td>60%</td>
<td>74%</td>
</tr>
</tbody>
</table>

**REPORTING**

- **URGENT CARE ARRIVED TO CHECK IN**
  - **JULY 2015**
  - Average = 26 minutes, Patients = 842
  - **OCTOBER 2015**
  - Average = 19 minutes, Patients = 381

- **ST. JOHN'S URGENT CARE WAIT TIME**
  - **JULY - DECEMBER 2015**
  - Monthly average in minutes (arrived to checked in)

**AIM STATEMENT:**

We strive to have Arrival to Provider time <20 minutes.

**NEXT STEPS:**
1. Continue 4 providers Monday and Friday
2. Status board for nurses
3. Protocols for nursing
4. Appointments available for booking online (Healow.com)

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