Workflow Analysis and Redesign

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Why Study Workflow?

- Workflow determines how things get done
- Each person / department does things a little bit differently
- Workflow affected by people, processes, and paper triggers
- In an EHR, information is embedded in fields
  - $1.4 million in lost A/R

Workflow Assessment Goals

- Capture “where you are now”
  - Establish a realistic starting point for EHR transition
- Create a healthy and secure infrastructure
- Identify areas that need attention now
  - Develop strategies to sustain clinical documentation and HIE in a secure environment
- Standardize clinical documentation
  - For super user and cross-training purposes.
- Establish baseline for implementation strategies
- Fold MU data entry / capture into new routine
Workflow: Cause and Effect

<table>
<thead>
<tr>
<th>Who/Location</th>
<th>What happens?</th>
<th>Who needs the data?</th>
<th>What happens if it isn’t there?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Receptionist, front desk</td>
<td>Verify name, address. Check eligibility card. Check photo ID, Collect Co-Pay</td>
<td>Clinical team Billing team</td>
<td>If patient is unknown, cannot verify patient’s identity. Strong potential for denied charges if patient info is missing. Audits reveal noncompliance, PT complaint. Co-pay may not be collected</td>
</tr>
<tr>
<td>MA / Clinic</td>
<td>Room the patient, complete initial intake, Signals (shoes off)</td>
<td>Provider, Patient</td>
<td>If patient is unknown, cannot verify patient’s identity. Strong potential for denied charges if patient info is missing. Audits reveal noncompliance, PT complaint. Co-pay may not be collected</td>
</tr>
</tbody>
</table>

Workflow Processes Analysis

Operational
- New patient registration
- Scheduling
- Rooming the Patient
- Check-in / Scheduled Patient
- Check-in / Walk-in
- Urgent Care Check-in
- Recall Visit
- Patient Payment
- Central Billing
- Messaging: Incoming Calls

Clinical
- MOA Intake
- Patient visit types
- Point-of-care documentation
- Vitals
- Problem list
- Medications / allergies
- Medical history
- Review of Systems
- Physical Exam
- Provider Orders

Chart Creation

[Chart showing various elements and processes]
Mission Critical: Analysis and Redesign

<table>
<thead>
<tr>
<th>Operational</th>
<th>Clinical</th>
</tr>
</thead>
<tbody>
<tr>
<td>Scheduling and Enrollment</td>
<td>Point of Care (POC) Documentation</td>
</tr>
<tr>
<td>Messaging Intra-Office</td>
<td>MA Input</td>
</tr>
<tr>
<td>Patient Check in and Check out</td>
<td>Standardized Templates</td>
</tr>
<tr>
<td>Rooming the Patient</td>
<td>Orders</td>
</tr>
<tr>
<td>Coding and Billing</td>
<td>Standardize order entry</td>
</tr>
<tr>
<td>Authorizations</td>
<td>eRx</td>
</tr>
<tr>
<td>Patient Collections</td>
<td>Lab orders</td>
</tr>
<tr>
<td>Chart Management</td>
<td>Standing orders</td>
</tr>
<tr>
<td>Server Storage Capacity</td>
<td></td>
</tr>
</tbody>
</table>

Map Current Scheduling Workflow: Identify Pain Points

- Patient
- Front Office
- Clinician’s schedule
Map Current Scheduling Workflow: Identify Pain Points

 Workflow Redesign Begins with Vision

- What do you want the clinic to look like?
  - How to manage information when Paper Triggers are gone
  - Focus on inefficiencies
  - “The EHR Vendor will make decisions for us.”
  - Outcomes if you wait for the EHR to make the decision for you
    - On the spot workflow revisions
    - Everyone will do what they always did
    - Prolonged loss of productivity
    - Lost sense of direction
    - Data extraction nearly impossible
  - Computer does not replace common sense

Deming Principles for Project Managing Change

- Define problem, opportunity
- Assess current situation and root cause
- Leadership buy-in

- Execute plan on small scale
- Review data, outcomes
- Incorporate and standardize
- Not successful – back to plan
Six Sigma

PMBOK

Define
Measure
Improve
Analyze
Control

3) Create a Vision for Change

KOTTER’S EIGHT-STEP CHANGE PROCESS

1) Create Urgency
2) Form a Powerful Coalition
4) Communicate the Vision
5) Remove Obstacles
6) Create Short-term Wins
7) Build on the Change
8) Anchor Changes in the Organisation’s Culture

Process for Workflow Redesign

Identify
We need this to change
What would it look like?
Goals: How do we get there?

Review
Current workflows
Analyze current state
Coordinate and map new workflows

Analyze

Approve
Team-think - acceptance
Leadership buy-in
No fear

Improve

Monitor, manage
Repeat, reinforce
Standardize
Standardize
Clinical Documentation SOPs

<table>
<thead>
<tr>
<th>MA/LPN/RN</th>
<th>Providers</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Reason for visit or chief complaint</td>
<td>Library of forms/templates</td>
</tr>
<tr>
<td>• Vitalts: H/W, BP, BMI, Growth charts for children</td>
<td>Free text – when to use</td>
</tr>
<tr>
<td>• Medication: Current, vitamins, OTC, herbal</td>
<td>Clinical Decision Support, Disease specific protocols</td>
</tr>
<tr>
<td>• Review and document allergies</td>
<td>Orders: eRx, Lab, Standing, Referrals</td>
</tr>
<tr>
<td>• Hx – Family, social, substance abuse</td>
<td>Results posting</td>
</tr>
<tr>
<td>• Smoking status 13+</td>
<td>Scanning &amp; Indexing</td>
</tr>
</tbody>
</table>

Next Steps: Clinical SOPs

Documentation Management
• MA Intake
  • Visit Types
  • Annual
  • Follow up
  • Problem specific
  • Urgent/Walk in

Chart Management
• Chart Creation
  • Template customization team
  • Scanning policies
  • Data configuration
  • Data abstraction processes
  • Data validation processes

Orders
• Lab orders
  • Internal
  • External
  • Pharmacy
  • Referrals
  • Internal
  • External
  • Standing MA Orders
  • Disease specific orders

Apply General Safeguards

Lessons Learned
• Everyone in the health care setting has a different idea of how work flows.
• Without workflow analysis, you really don’t know what needs to be redesigned.
• Workflow analysis and redesign involves time investment from all departments.
• Health care professionals know redesign is required; but they don’t know what they don’t know.
• It’s not the EHR vendor’s job to redesign your workflow.
• Go through the EHR’s online training, and ask “What has to be in place before we can implement this step?”
• Redesign is an ongoing process.
Thank You!

For more information, please visit:

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