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How to Make a Change

- Part One – The benefits of Process Mapping and how to compile a Process Map - Chris

- Part Two – Reviewing your Process Maps (Peer Review) - Deb

- Part Three – Creating a Future State - Andy

- Part Four – Prioritising your Improvement Projects - Andy

- In order to make change happen, its necessary to demonstrate, that there is a problem!
- So what can you do?
  - Make the problem/s visible for everyone to see
  - Generally, most of us have a natural tendency to want to fix a problem if we see it
  - But it's important to ensure the 'fix' works for everyone along the chain
  - **Process Mapping - a simple and effective tool, which works!**

What is Process Mapping?

- It's a visual representation of the patient journey which shows how the administrative and clinical processes **actually** happen, rather than what **should** happen.

- This is generally referred to as mapping the 'current state'

How does it Work?

- It will help you identify:
  - Unnecessary delays
  - Any constraints or bottlenecks
  - Unnecessary steps
  - Unnecessary handovers
  - Duplication of effort and waste
  - Things that don't make sense or are not logical

Mapping the Problem

- There are various process mapping methodologies, they all have pros and cons but ultimately each will help to identify and structure the problems, which need to be improved
  - Conventional - Brown paper and post it notes!
  - Walking the patient journey
  - Following a patient
  - Reviewing files and patient records
  - Workflows: Spaghetti diagram

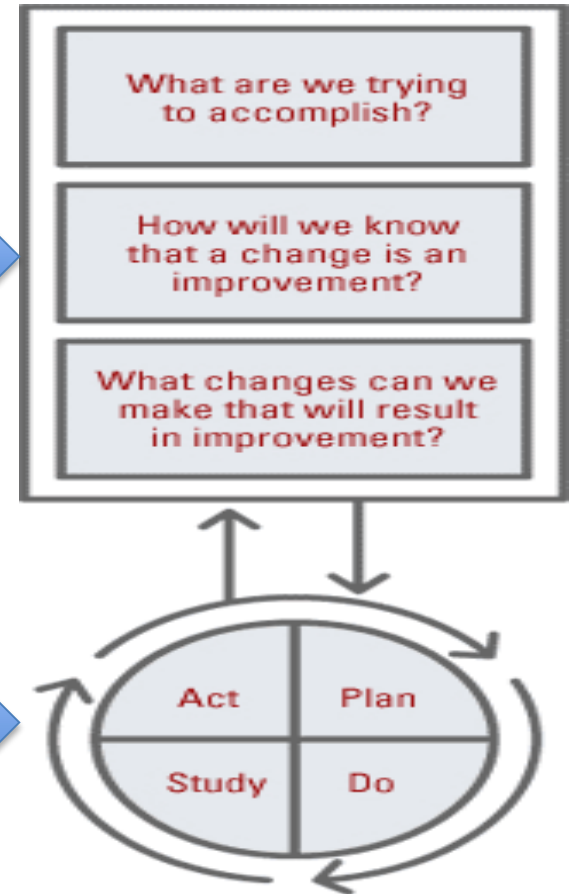# First Steps - Start with a Structured Approach
IHI Model for Improvement

Process Mapping can assist stakeholders to identify the aim, by identifying problems/issues

Measurement helps to define the aim and demonstrates progress & outcome

Prioritising the changes - (Prioritisation Matrix)

Testing the Change

What are we trying to accomplish?

How will we know that a change is an improvement?

What changes can we make that will result in improvement?

Act | Plan
Study | Do

- This approach will help you:-
  - Develop a shared understanding of the problem
  - Identify issues to do with quality of care
  - Gain an in-depth understanding of the patient perspective
  - Build teams
  - Identify steps that don't directly contribute to patient care

- Strengths:
  - Different perspectives
  - Interpretation is shared
  - Lots of ideas for improvement
  - Team building
  - Everyone understands the issues, so reduces resistance to change proposals
- Potential issues:
  - Effort to set up
  - Time-delay in setting up
  - People who aren't in the room, don't get engaged
  - Lots of ideas for improvement overwhelming, so follow-up may not meet expectations
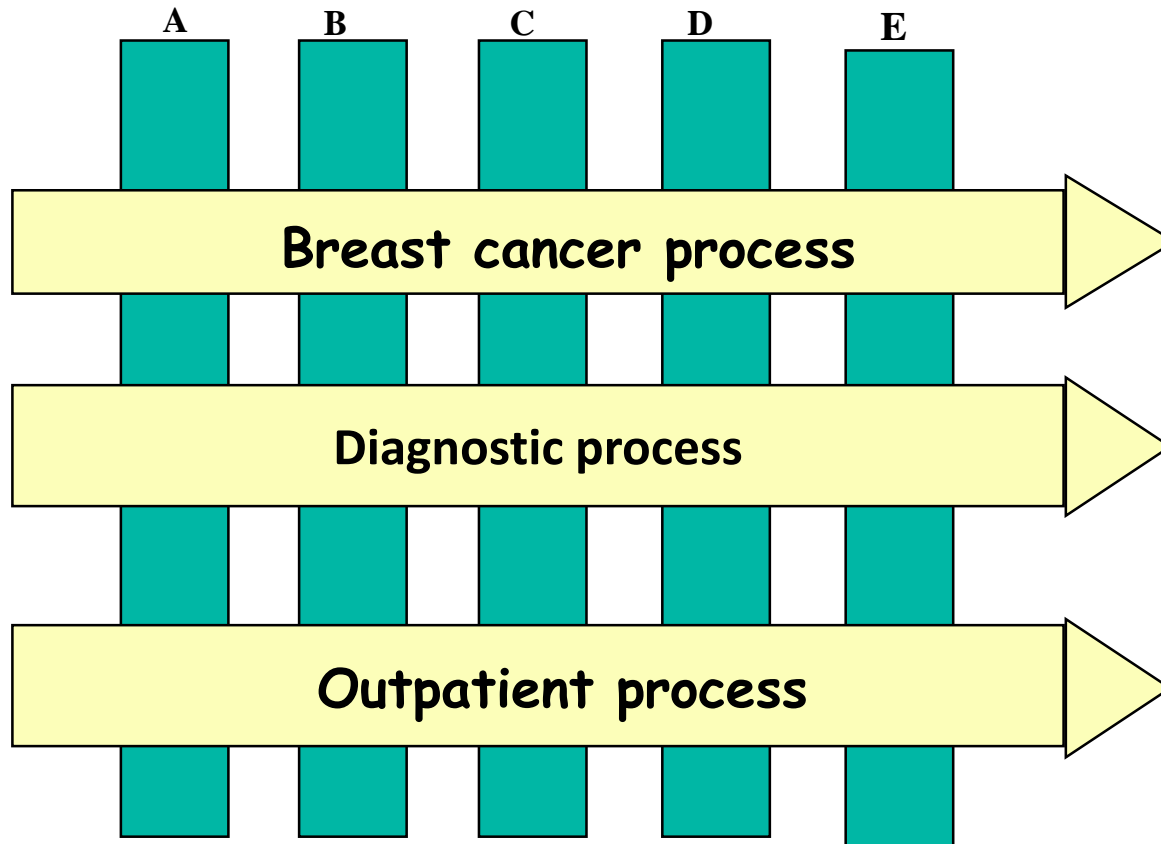
How do you start?

- Processes are often long and complex and involve many departments and people

- Some departments/services may work well in their own silos

- **BUT** they may cause problems and issues for other parts of the system!

organisational/departmental boundaries

A B C D E

Breast cancer process

Diagnostic process

Outpatient process

- identify scope - where does patient process start and end

- group patients by common needs and think about demand (needs) not supply

- map the process - understand what really happens to patient and the problems from view of patients and providers

Getting Started

- Invite the team
- …usually between 5 to 20 people!
- Venue
- Suitable sized with sufficient (unobstructed) wall space
- How long for?
- Can take just a few hours or days – dependant on process complexity and the chosen start and finish points
- Or… build your map with small groups or individuals, in different sessions

What Practical Things do you need?

- A big roll of Paper
- Blu Tack
- Post it Notes
- Felt Tip Pens
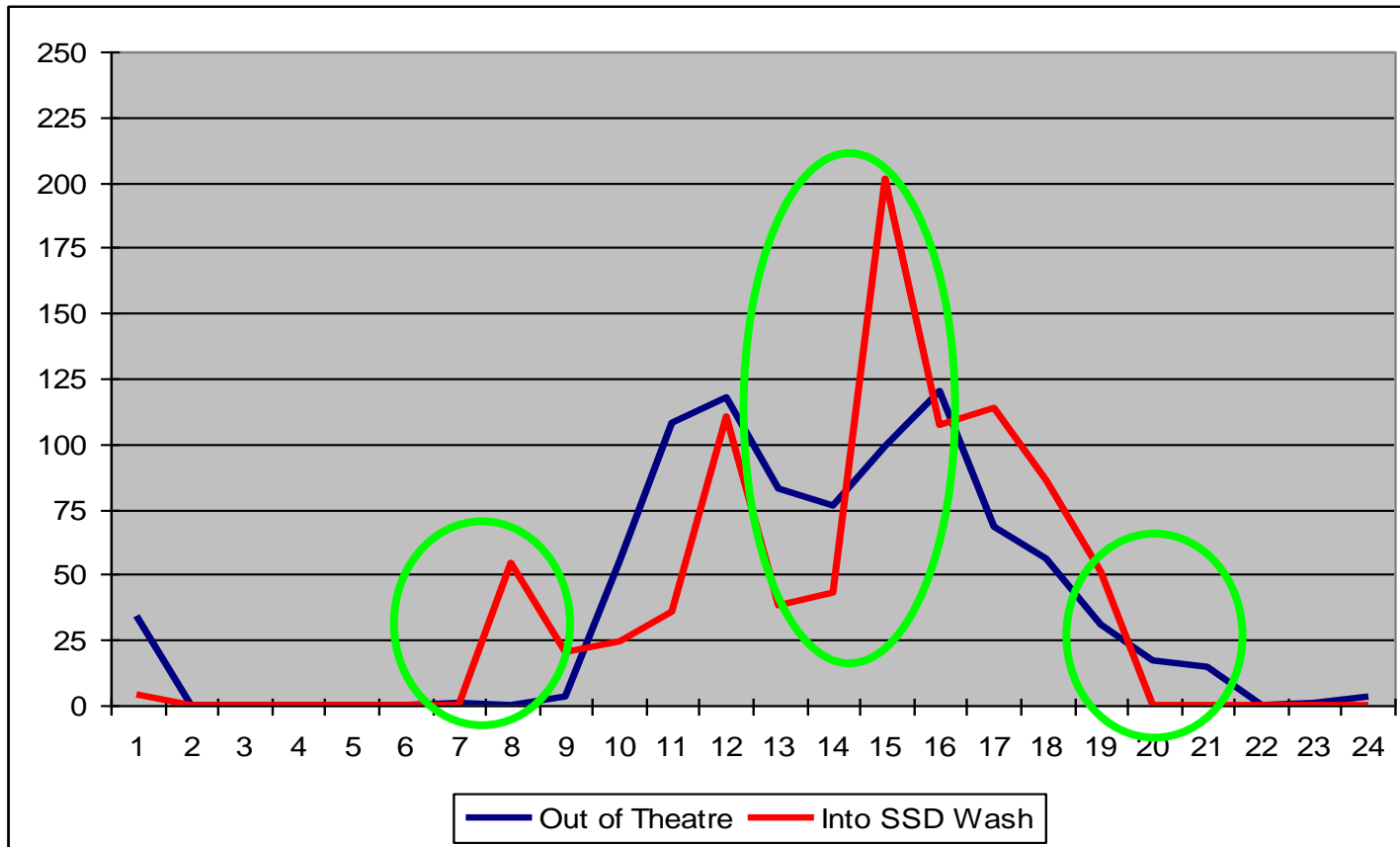- Sticky Tape
- Scissors
- Rubber Bands

Also a good idea to have a couple of these in the Room to record measurement points and good ideas!

Issues and Data Collection points

Car Park for good ideas!

Data Collection can be really useful to separate fact from myth!

Compiling a Process Map

- **Name of person**
- **completing task**
  - **+**
  - **verb**

- who does what *to the patient*
- 'quick and dirty'
- what you do in 80 per cent of cases
- test it with other people

High Level   Refer OPD Diagnose

Medium Level

Detailed

An example of the real thing in Action!

Patient Process and Parallel Processes
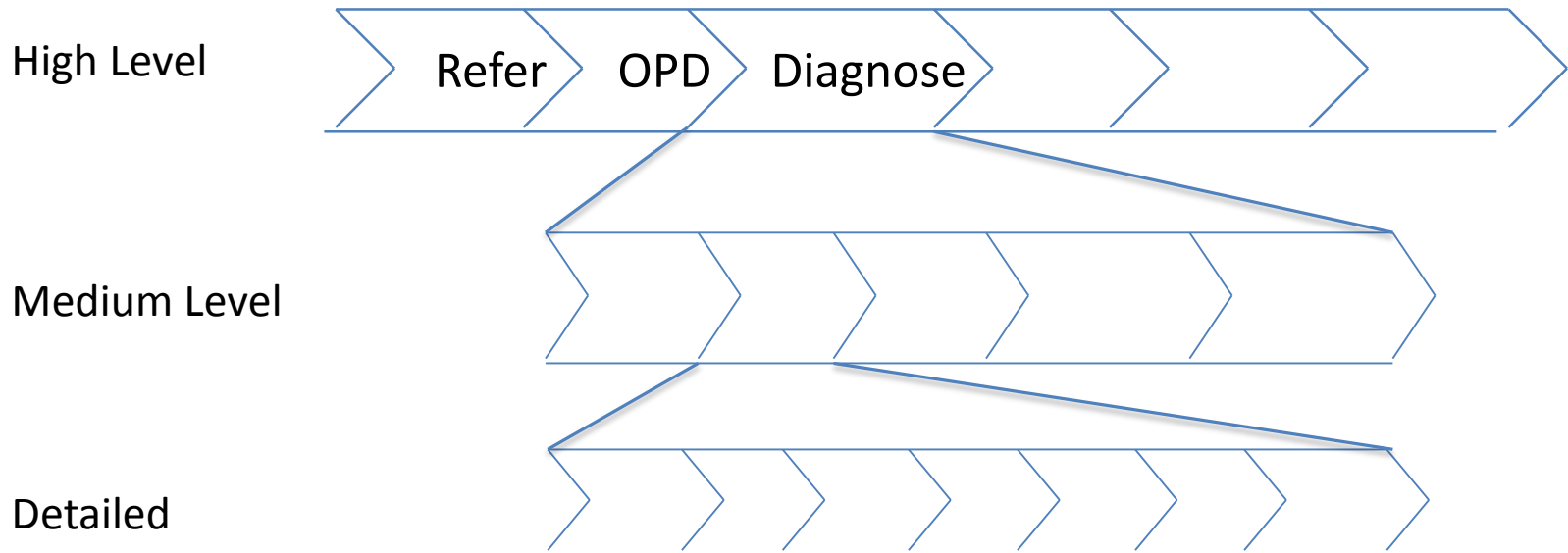
Patient process

Parallel process: administration process

GP tells patient needs appointment at hospital

Patient waits

Ambulance takes patient to hospital
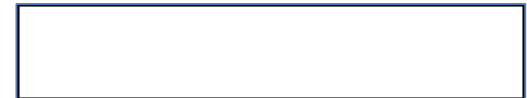
Patient Process and Parallel Processes

Patient process

Radiographer sends pt back to ward after chest x ray
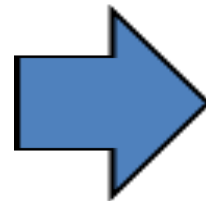
Patient waits ward

Dr discusses diagnosis with pt

Parallel process: x ray department

where does it start ?

where does it end ?

woken by alarm

wash

dress

breakfast

prepare for work

travel

arrive at workplace

- producing a time lapse diagram

What is the approximate time of

woken by alarm	(Seconds)
wash	20 minutes
dress	10 minutes
breakfast	10 minutes
prepare for work	15 minutes
travel	50 minutes
arrive at workplace	5 minutes

1 hour
50 minutes

Map your own Process

- On your table compile a process map, it can be anything you want relevant to your service. For e.g.
  - Assessment
  - Diagnostic Requests/access to Ultrasound
  - Access to Theatres
  - TTO's
  - Discharge
- **YOU HAVE APPROXIMATE 30 MINUTES**