Process Mapping of Key Coordination Tasks

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CC Process Mapping Session Objectives

• Teams describe/identify CC team’s partner agencies’ role in performing key care coordination tasks.
• Participants design their team’s process map/workflow of CC tasks and key decision points.
• Participants will identify gaps and duplications of tasks that will improve CC effectiveness and workflow.
What Is a Process?

• A process is a set of causes and conditions that repeatedly come together in a series of steps to transfer inputs into outcomes. (Langley, et al., 2009)

• A process is a continuous and regular action or succession of actions, taking place or carried on in a definite manner, and leading to the accomplishment of some result; a continuous operation or series of operations; (Caulkin 1989)

What Is a Process Map?

A visual aid for picturing work processes which shows how inputs, outputs, and tasks are linked

“If you can’t draw a picture of your process, you can’t improve anything.”

--W. Edwards Deming
Examples…

Inputs > Process > Output

Car
Driver
Car key
Gasoline

Start car
Drive south 2 blocks
Turn left
Drive east 1 mile
Trip made
Stop at 101 Elm St.

Flow Mapping Example…

Brushing your teeth

Open toothpaste → Wet toothbrush → Apply paste to brush → Brush teeth

Turn off light
Put away paste and brush
Rinse mouth
Rinse brush
Process Mapping Steps

- Choose a process that is critical to success
- Walk through the process for each partner one time and take notes
- Build a list of specific steps for each process (Task)
- Flow the process using Post-it Notes for each step of the process on butcher paper or a series of flip charts
- Start at the beginning and map out each step (If the process already exists, map out the way work is currently done. If it is a new process, create the ideal process)
- Identify gaps first, then work on problem areas
- Keep in mind the goal of the process
- Develop and test solutions
  - Use PDSA cycles
Process Mapping Using the Paper on the Wall Approach

- Shows the “Big Picture”
- For an existing process: describes a process as it works today; an “as-is” model
- For a new process: design the ideal process
- High touch, low-tech
- Identifies gaps, strengths and opportunities
- Captures the complexity and disconnects of key operational issues
- Identifies outside areas involved in the process

How do we get anything done?

Legend:
- Process
- Inspect
- Wait
- Administrative
- Move
Benefits

- Highlights gaps in care
- Puts a spotlight on problem areas
- Promotes deep understanding
- Streamlines work processes
- Defines and standardizes the steps and sequence
- Builds consensus

Patient given FOBT cards

RN enters patient name and date into log (in lab)

Returned cards are processed by lab staff and results entered into log

Lab gives results to PCP immediately. PCP calls and refers for colonoscopy

Positive?

No

Results notification mailed

Yes

RN schedules appointment

But what about....?
Patient given FOBT cards → RN enters patient name and date into log (in lab) → Log checked q 2 weeks for follow up phone calls needed → Returned cards are processed by lab staff and results entered into log → Lab gives results to PCP immediately. PCP calls and refers for colonoscopy → RN schedules appointment and places reminder in tickler file → Medical records checks tickler and calls for results; reports no-shows to RN → Results notification mailed → Positive? → No → Results notification mailed → Yes → Gaps addressed:
1. Follow up for FOBT cards that have not been returned
2. Ability to track if patient received colonoscopy and get results and plan to PCP

Benefits

- Highlights gaps in care
- Puts a spotlight on problem areas
- Promotes deep understanding
- Streamlines work processes
- Defines and standardizes the steps and sequence
- Builds consensus
Mapping Process Session Overview

- **10 min**--Review/compare Teams CC Processes Roles Worksheet with CC Processes and CC Tasks for Process Mapping (new handout)
- **1 hour**--Build CC workflow map for selected CC tasks and decision points for each partnering organization.
- **30 min**--Identify gaps and redundancies in CC tasks being or to be performed by team partners. Develop plan to address gaps and redundancies
- **15 min**--Share learning across teams: What surprised you re: process map? What are your next steps?

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### Key Care Coordination Processes and CC Tasks for Process Mapping

<table>
<thead>
<tr>
<th>Process</th>
<th>CC Tasks for Mapping</th>
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<tbody>
<tr>
<td>1. Outreaching, engaging, and facilitating clients’ access to appropriate services</td>
<td>1. Identify clients in need of Care Coordination</td>
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<tr>
<td>2. Defining the Care Team (including natural supports) for each client/patient</td>
<td>2. Contact and engage clients in care coordination</td>
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<tr>
<td>3. Ensuring and monitoring consent to share clinical information (ROI)</td>
<td>3. Handle ROI (initial &amp; changes)</td>
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<tr>
<td>4. Ensuring and monitoring appropriate screening for medical, mental health and substance use conditions</td>
<td>(NA for Process Map)</td>
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<tr>
<td>5. Facilitating referrals</td>
<td>5. Facilitate completion of referrals—both &quot;internal&quot; (within team) and &quot;external&quot; (to outside treatment providers).</td>
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<tr>
<td>6. Entering clinical information into caseload registry tool</td>
<td>6. Document information (referral results, care goals, screening, medication reconciliation, etc.)</td>
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<tr>
<td>7. Conducting multidisciplinary clinical care conferences</td>
<td>7. Hold regular multidisciplinary care meetings (Target population CC across core partners)</td>
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<tr>
<td>8. Ensuring and monitoring routine medication reconciliation</td>
<td>8. Reconcile medications including across all providers</td>
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<tr>
<td>9. Supporting client self-management</td>
<td>(NA for Process Map)</td>
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<td>10. Ensuring and communicating shared care plan goals among client/patient and providers (primary care, mental health, and substance use providers)</td>
<td>10. Work with client to create a shared care coordination plan and share among all providers</td>
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<tr>
<td>11. Ensuring availability of ad hoc clinical case consultation</td>
<td>11. Develop and coordinate ad hoc case consultation</td>
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<tr>
<td>12. Ensuring urgent care access to specialty MH, SUD or primary care</td>
<td>12. Provide streamlined and urgent care access to care</td>
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CC Process Mapping (10 min)

Review and compare new handout re: CC Process and CC Tasks for Mapping with CC Processes and Roles Worksheet previously completed and submitted by each Team.

- Are roles for each provider organization and MCO clear for tasks identified for mapping
- Based on Roles Worksheet, Identify key tasks that are not addressed or that unnecessarily overlap

Build Care Coordination Workflow (1 hour)

- Write down CC Tasks for each partnering organization on sticky notes
- Starting with 1 or 2 client(s) point of entry/access into CC system place sticky notes with tasks in each provider organization’s column on butcher paper
- Indicate decisions/decision-points on diamond shaped sticky notes (turn sticky notes sideways)
- Use markers to indicate flow between tasks and decision points
**Process Mapping Steps**

- Choose a process that is critical to success (Tasks 1, 2, and 5 – if you have time add Task 3)
- Walk through the process one time as a team and take notes
- Build a list of specific steps for each process (Task)
- Flow the process using Post-it Notes for each step of the process on a series of flip charts
- Start at the beginning and map out each step (If the process already exists, map out the way work is currently done. If it is a new process, create the ideal process)
- Identify gaps first, then work on problem areas
- Keep in mind the goal of the process
- Develop and test solutions
  ✓ Use PDSA cycles

**Workflow Mapping Process**

**Resources for session:**

- Team’s Completed “CC Processes and Roles Worksheet (Teams bring copies for their members to session)
- CC Processes and CC Tasks for Process Mapping (new handout)
- Butcher paper, sticky notes, colored markers
Identify and Develop a Plan to Address CC Gaps And Redundancies (30 Min)

• **What tasks are not adequately addressed and/or where are organizations unnecessarily duplicating tasks?**
  – Example: Does each organization initiate ROI or there a centralized process where client completes for all identifiable CC team providers?

• **How can this workflow be improved to address gaps/reduce duplication?** How will you follow up after Learning Session? Be specific.

Share Learning Across Teams

• What did process mapping reveal about your CC system-and how can you improve it?
• What tests/PDSA cycles might you run?
• If you translate CC process map to paper/online visual depiction, how might this be helpful to your Team?