

Applying Lean Methodologies to Decrease Patient Wait Time in an Outpatient Oncology Infusion Center

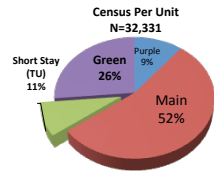
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Call for Change

“Significance – Patient Visit Volume”
Outpatient Oncology Infusion Center
September 23, 2013 – December 23, 2013



At the individual patient level, excessive wait time can lead to increased frustration and anxiety **impacting perceived quality of care** (Catania, et al. 2011)

At the institutional level, excessive wait time across the hundreds of patients scheduled daily leads to **low patient satisfaction** scores which could have **revenue implications** (Kallen, et al 2012)

Aim: To decrease mean patient wait time (check-in to start of treatment) by 30% over a 90 day time-frame.

Definitions:

Treatment ready - A patient is deemed “treatment-ready” after an ATC Clinical Nurse has reviewed and resolved any patient care issues that could delay or cancel the patient’s prescribed treatment
Not treatment ready: A patient who arrives to the treatment center with patient care issues that must be resolved prior to the start of treatment

Chart triage is the review of the medical record to determine if the patient is “treatment –ready”.

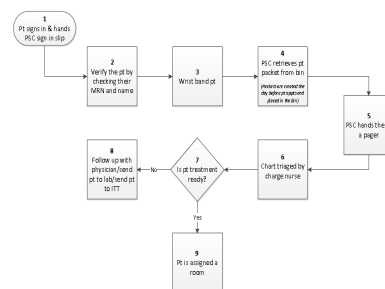
Short stay unit criteria treatment regimes were 2 hours or less

Focused areas for Improvement

Timely chart triage process

- **Goal:** Review 85% of charts within 30 minutes of patient arrival to determine if the patient was treatment ready

Chart triage process map



Short stay unit

- **Goal:** Decrease mean patient wait time by 30%

Issues Investigated

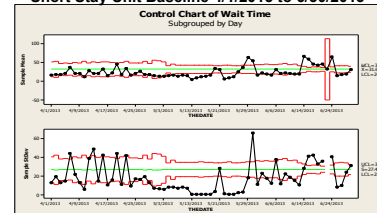
Issues identified

- Why patients are **not treatment ready**
- Patient expectations
- Unit capacity

Data is needed for change!

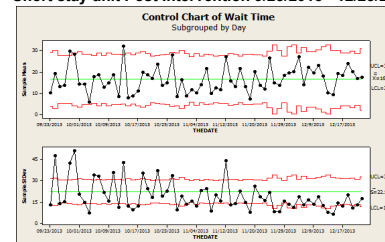


Short Stay Unit Baseline 4/1/2013 to 6/30/2013



N= 3465 Mean patient wait time = **31.6 minutes**
Special cause variance noted 2nd graph-4 rooms out of commission for repair

Short stay unit Post Intervention 9/23/2013 - 12/23/2013



N=1,959 Mean patient wait time = **16.52 minutes**

Results



Timely chart triage process

94% of charts were reviewed within 30 minutes of patient arrival

Short Stay Unit

Mean patient wait time was **decreased by 47.7%** as compared to baseline

Practice Implications

- Hard wire process
- Monitor & evaluate sustainability
- Implement in other units
- Address identified issues



References

Catania, C., De Pas, T., Minchella, I., De Braud, F., Micheli, D., Adamoli, L., ... Nole, F. (2011). Waiting and the waiting room: How do you experience them? Emotional implications and suggestions from patients with cancer. *Journal of Cancer Education*, 26, 388-394.

Kallen, M., Terrell, J., Lewis-Patterson, P., & Hwang, J. (2012). Improving wait time for chemotherapy in an outpatient clinic at a comprehensive cancer center. *Journal of Oncology Practice*, 8(1), e1-e7.