

# TRANSPLANT CASE STUDY

## Process and Performance Optimization



ABC Transplant Center

### Client Overview

- 'ABC Transplant Center' (Center) is a service line of the 'ABC Medical Hospital'
- One of the top 20 programs by volume in the United States; transplanting nearly 300 patients annually
- Located in the Southeastern United States
- The Center employs nearly 70 non-physician clinical and support staff and is managed by a Medical Director and Service Line Administrator

### Problem Statement

- Exceedingly low staff and physician engagement scores despite good clinical outcomes
- CMS and UNOS audits indicate lower than desired administrative scores
- Non-physician leadership has been inconsistent; three Service Line leaders (SL) in five years
- Limited documented work processes and staff procedures; very little accountability
- EPIC and VELOS EMR rollouts were not fully adopted; most processes are manual and paper-driven

### Project Overview

- Initially retained to address staff engagement and organizational issues; findings demonstrated issues were related to both human capital and process/workflows
- Previous Service Line leadership was counseled out and an interim SL leader was named in late 2012; Interim recently made permanent
- Systematic review of processes and procedures found deep rooted cultural dysfunction and non-compliance with existing procedures
- A compliance/risk manager was retained to oversee the development of QAPI metrics and internal policies as well as to ensure strict adherence to UNOS/CMS regulations
- Engagement extended to migrate from people/relationship centered work to that focused on processes and technology
- Began work with Kidney team; new workflows and supportive processes uncovered extensive backlog of pre-kidney patients in various stages of review
- Facilitated cross-team design sessions to map both 'as-is' and 'to-be' processes; all focused on making the Center efficient, effective and patient-centered
- Technology Steering Committee established; goal of driving broad-based adoption of technology-based best practices
- Engagement further extended to include all organ teams and to continue help SL leadership implement changes

### Results

While the project is ongoing, preliminary outcomes include:

- Physician engagement reported as the highest within the entire Hospital; staff engagement improved one tier
- Cultural change is occurring. Organ teams function as a unit and support cross-organ workflows. Team established vision of "having efficient 'Zappos-like' processes with 'Four Seasons-like' patient satisfaction"
- QAPI metrics and a full-complement of policies have been developed and operationalized
- Accountability standards and role-based KPIs are being developed and will be incorporated into reviews by 2014
- Nephrology team reviewed nearly 1,000 backlogged patients (55% pre-evaluation, 45% waitlist inactive) and set care plans/go-forward strategies for each
- Nephrologists, Surgeons and clinic staff created new workflows and added nearly 50 extra slots to their weekly clinic template
- Newly developed and implemented pre-Kidney processes expedited a patient from the initial referral to an active listing within 60 days; eliminating nearly six (6) months of non-value added time from previous workflow
- Conesus with Hospital's CTO and CMIO on the need to redeploy and optimize EPIC – completion goal of Jan. 2014
- Plan established to implement EPIC's Phoenix module in 2016