

BENEFITS PACKAGE DOCUMENTATION

AMH OSH QUALITY OF CARE – DIETARY CONSULTS

Event Id (if applicable): AMHO4 1.1
Version 1.0
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EXECUTIVE SUMMARY

AMH Initiative O4 focuses on improving quality of care standards and processes. The Oregon State Hospital (OSH) launched this portion of the initiative to address findings in the CRIPA report from the US Department of Justice in an effort to reduce the cycle time for dietary consults, eliminate the dietary consult backlog, and to address Metabolic Syndrome. Initial results are positive – after three months, we increased process efficiency by reducing the consult cycle time 87% (from 150+ days to 20) and eliminated the backlog of dietary consults. In addition, every new patient admitted to OSH now receives a consult. We will continue to monitor the process for sustainability and to drive to the goal of completing a dietary consult within 7-days from the consult request. Of note, is that many metrics that could quantify quality improvements are burdensome to track without an electronic medical record system. We can anticipate that an electronic medical record system can promote additional tracking of Metabolic Syndrome, ideal weight, or diet related health care costs.

IMPROVEMENT SUMMARY

A Rapid Process Improvement (RPI) event was held in October 2008 to streamline the dietary consult process.

- The steps involved in requesting and completing a consult were reduced from 40 steps to 21 steps.
- Wasteful steps involving unnecessary paperwork and long wait times were removed from the process to decrease cycle time and increase efficiency.
- A standard consult request process was created and employees were trained on this new process.
- A standard method of communicating the assessment to the physicians for implementation was created.
- Our primary metric was the time required from consult request-to-consult completion.

We completed most of the actions required for the future state process by November 2008. Final actions were completed by December 2008. We are now monitoring the process for sustainability.

BENEFIT/OUTCOME DESCRIPTION

From November 1, 2008 to March 31, 2009 the following quantitative benefits have occurred:

- The cycle time for dietary consult completion has been reduced from 150 days to 20 days.
- There were 98 people waiting for a dietary consult before the RPI, 100% of those consults have been completed.
- 100% of the people that are admitted to OSH now receive a dietary consultation.

Cost Savings

- No cost savings associated with this RPI are being reported to date. However, the OSH Lean Team is closely monitoring key metrics for the six (6) month period from April 2009 through September 2009 to measure which metric(s) will result in future cost savings and/or savings re-deployment. These metrics may include staffing requirements for the number of clinical dieticians, and the sustainability of the decreased cycle time from initial request to consult completion.

Quality

- Increased care for patients by increasing the provision of dietary consultations.
- Improved care for patients by providing a more consistent staffing pattern.

Service

- Improved accuracy of dietary changes.
- Improved communication with the patient, ward staff, physicians, and the OSH kitchen staff.
- Decrease in the number of frivolous food orders.

People

- Increased confidence in the dietary consult process.

LOGIC DESCRIPTION

ATTACHMENTS:

Scorecard

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Dietary RPI Scorecard



Monthly Indicators	Dec-08	Jan-09	Feb-09	Mar-09	Apr-09	May-09	Goal	Current Status
Assessments Completed	83	114	105	102	104	53		
New Requests Received	70	120	142	128	159	144		
Average Consult Cycle Time ¹	17	11	12	20	21	24	57 Days	

Quarterly Indicators	1st Qtr 2009	2nd Qtr 2009	3rd Qtr 2009	4th Qtr 2009	1st Qtr 2010	2nd Qtr 2010	Goal	Current Status
Patients identified and referred accurately (%)								
Dietary Consults Signed by MD (%)								

Legend
Improvement Needed
Progress Made
Goal Reached

Notes
¹ Time from initial referral to completing consults and placing in medical record