



# Case Study: **Enterprise-Wide Scheduling Guide Optimization**

## PROJECT OVERVIEW

An Academic Medical Practice organization with approximately 600 providers engaged Culbert to design, build and implement athenahealth Centricity Business (CB) Scheduling EWS Question Guides for their newly re-designed centralized scheduling team.

## GOALS / CHALLENGES

The organization needed to improve provider utilization and decrease the wait time for appointment availability. They had implemented a centralized scheduling model but experienced an increase in scheduling errors. They needed a way to get the department's scheduling expertise and knowledge in front of the non-experienced centralized schedulers in an efficient, user friendly manner to insure accurate scheduling.

## SOLUTION DESIGN / PROJECT MANAGEMENT

The client wanted us to design, build and implement the Centricity Scheduling EWS Question Guides for their 24 departments that schedule in CB and are serviced by the centralized scheduling department. The designs needed to follow the established department guidelines, maximize providers availability and set the schedulers up for success.

In the 20 weeks allotted for this project, we were able to evaluate the SOW, devise a project plan and analyze and translate their existing scheduling guidelines to guided scheduling questions. We did meet with each department and made revisions to the designs based on their recommendations and did the build for the 606 designed question guides as well as validated and implemented them.

## KEY SUCCESSSES / OUTCOME

On our arrival, the client already had large, comprehensive documents for each department that the schedulers were supposed to refer to when scheduling appointments. The challenge was that for any one caller, while most of the information in the comprehensive document did not apply, there were a lot of little nuggets of information riddled throughout that did apply. These little details were sometimes critical to the success of the scheduling process. So, how did we design and build the question guides in CB to be "focused" and to show just the nuggets that pertain to each specific call encounter?

### ***For each Scheduling Department:***

- Translated their large existing "flat" scheduling document into a guided questions design document. In that design, each guide streamlined the information until the end results gave schedulers only the details they needed for the requested appointment.
- These initial design documents were then reviewed with the key resources from each department and modified and/or refined to meet the expectations of the department's leadership.
- The revised designs were built in CB and validated.
- Centralized Schedulers were trained on the simple usage of the scheduling guides.

We continued with the cycle of design/review/redesign/review/build/validate/implement with all departments in a fluid manner. That is, we had multiple departments in multiple phases of the project at the same time until the build for all departments was complete.

***Additionally, as part of this project:***

- Teams were thoughtfully made and incorporated into the design such that schedulers would have broader searches to find timely appointments.
- Messages were added to the guides such that if an appointment could not be scheduled within a defined timeframe, the scheduler was instructed specifically how to contact the department to get the appointment schedule.
- We showed management how to use the appointment guide audit trail in CB to trouble shoot scheduling errors.
- We provided the IT team with reports and ideas that will aid in the maintenance of the guides.

Schedulers and departments are reporting that they find the guides useful and appointments are being made more timely and accurately.

Feedback from schedulers show appreciation for having clear concise directions when scheduling using these guides. It made their process easier and more consistent and accurate.

## **LESSONS LEARNED**

When the departments/providers made their guidelines for the centralized scheduling team, they were thinking about it from a provider's perspective not a scheduler's. (Example, they each had a table of their providers and what diagnosis that provider would see and what patient ages they would see. But with no team or guide built, this was a challenge for the schedulers who had to search for available appointments one provider at a time. Looking at things from the scheduler's perspective served as a kind of policy review for departments and helped them identify where there were gaps or inconsistencies. For instance, when a patient under the age of 18 needs to be seen for a specific diagnosis and the guidelines have no providers defined for this scenario, what should the scheduler do?

## **Testimonials**

*"I am really excited about how wonderfully helpful this guided scheduling will be!!"*

*– Nurse Manager, Department of Plastic Surgery*

*"This is fabulous!! Thanks for your hard work. People are really excited about this."*

*– Executive Director of Clinical Operations*

*"This looks really good. Thanks for updating this information. I am excited we have this new system."*

*– Medical Care Coordinator Department of Psychiatry*

*"Fantastic work team! You've done an amazing job in such a short amount of time."*

*- Director – Revenue Cycle Technology*