

WHAT'S HAPPENING

A newsletter for the Maine Medical Center family

Improving Patient Care Through Operational Excellence *How MMC Clinics Embraced the 'OpEx' Challenge*

The Outpatient Clinics at MMC are celebrating several Operational Excellence achievements. Only a few months into the lean management system, clinic staff has already closed out about a dozen KPIs (Key Performance Indicators), completed a few 'just doits' (smaller action items), and have trained multiple staff members as Operational Excellence Operatives.

Their most important achievement, according to Fran Lofland, Director of Practice Operations for the Outpatient Clinics, and Debra Pyle, Practice Manager, Outpatient Clinics, is the improvement to patient care carried out by their highly engaged employees.

"This is all about opportunity," says Pyle. She sees how the Operational Excellence training and implementation have given her staff ownership of their workspace, decision making, and patient care.

"The neat thing about this is the simplicity of the process ... you don't need to be a data analyst to get it," says Lofland. "The ease is what keeps it moving



Julia Blake, Nursing Unit Helper II, left, shares the Clinic's recent KPI data at a gemba walk on February 10, as walkers and walk leaders listen.

forward."

A good example of this simplicity was the implementation of reminder calls to decrease no-show rates. Patients receive better care when they make it to appointments, and calling them ahead of time gives the patient an opportunity to cancel or reschedule. Staff can offer cancelled appointments to other pa-

tients, cutting down on wasted time. Achieving this KPI was easy and has especially benefitted busy and elderly patients who sometimes need an extra reminder.

Other KPIs are more complex and require collaboration with other departments. Medication reconciliation (med rec) is the process of creating an accurate

list of all medications a patient is taking and comparing that list against the physician's admission, transfer, and discharge orders. The goal is to provide correct medications and ensure patients understand their prescriptions and how and when to take them. The clinics tend to attract a high-risk population, and these

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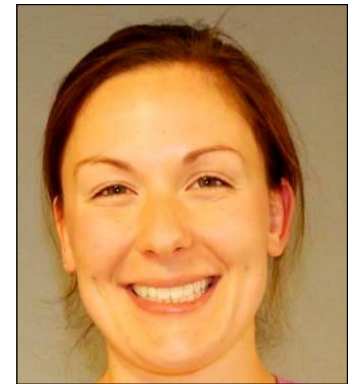
DAISY Winners Recognized for Compassionate Care

R5's **Kathryn Michaud, BSN, CMSRN, CN3**, and the Transplant Program's **Cheryl Merrill, R.N.**, were recently recognized with DAISY awards. The DAISY Award for Extraordinary Nurses "honors the super-human work nurses do for patients and families every day."

Michaud's colleague writes of her care for a particular patient, "Katie joked with him, laughed with him, engaged him and brought him

out of his shell. It was obvious; he felt comfortable with her and trusted her."

Merrill was also nominated by a colleague who says, "Cheryl exemplifies the core values of nursing: professionalism, compassion, courage, integrity, respect, and humility. She is adaptable, flexible, and makes multitasking seem simple. She has made a difference in countless lives, and given hundreds of patients the tools, strength, confidence,



DAISY award winners Cheryl Merrill and Kathryn Michaud.

and knowledge to heal and live full lives following transplant."

To learn more about DAISY awards, visit daisyfoundation.org.

'Improving Care' From front

patients may be on multiple medications or have a difficult time following directions. To achieve the KPI, clinic staff worked with Nancy Nystrom, the ED Med Rec Pharmacist, to adopt the Pharmacy's process of medication reconciliation.

"Our patients are some of the highest users of the ED," says Fran, so it made sense to turn there for help.

Although the med rec KPI was more complex than the reminder calls, the process was the same: Set a goal, develop action items, and measure progress until you reach the goal.

As anyone who has been on a gema walk knows, every station meeting ends with a walk leader asking "Is there anything we can do for you today?" One morning, the clinic staff requested an in-house machine for blood sugar testing. They explained that many diabetic and at-risk patients were not going for a blood sugar test, called the A1C, before showing up to appointments. Clinicians cannot fully treat these patients and would sometimes have to schedule a new appointment.

The day after Clinic staff requested the machine from hospital leadership, it was delivered to their door. By the end of the week staff was using the machine dur-

ing appointments.

"We almost immediately saw a patient who was off the charts," says Pyle. "It probably saved a visit to the ED."

Along with those 'wins' there have been some challenges associated with implementing Operational Excellence. It took time to engage staff and remind them of the process. Residents rotate through the clinic every two weeks, representing a consistent cycle of training.

But Lofland says the benefits of OpEx make it worth the hard work. In addition to improved patient care and employee engagement, Clinic leaders have become

closer and collaboration with other departments has grown thanks to new relationships. The benefits of OpEx in the Clinics extend beyond patient care and employee engagement. Clinic staff and leaders recognize one another around the hospital and stop to chat. Employees are collaborating more with other departments and engaging more with each other.

"Operational Excellence is team-based care at its best. All members of the team need to play a role for the KPIs to succeed," says Elizabeth B. Eisenhardt M.D., Clinic Physician Site Leader.



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