QUALITY IMPROVEMENT STORYBOARD





Division/ Program:	Curtis Tucker Sexual Health Clinic
Project Title:	Reducing Patient Lab Results Calls
Project Timeline:	March 27th- June 5th, 2019
QI Specialist(s):	Curtis Tucker Continuous Improvement Team (CIT)

1. **Getting Started**

The Curtis Tucker Public Health Center's Continuous Improvement Team (CIT) sought to reduce patient phone calls for lab results even when enrolled in the portal.

2. Assemble the Team

CITs have a labor-management partnership structure; the Curtis Tucker team is co-led by labor and management staff and consists of staff from all units (e.g., business office, nursing, physicians) in the Sexual Health clinic.

3. Define the Problem/ AIM Statement

PROBLEM: Patients were calling during clinic hours requesting lab results disrupting clinic flow due to difficulty understanding lab results in the portal.

SMART GOAL: To reduce average calls from 2.3 calls/day to 1 call/day by May 31, 2019.

4. **Examine the Current Approach**

The team examined its current approach in answering patient's phone calls by collecting and analyzing baseline data. Baseline data indicated an average of 2.3 calls/day. A process map to understand the impacts on work flow was created and shown below:



5. **Identify Potential Solutions**

The team had several "Tests of Change" (TOC):

- Assign patient phone hours on Mondays and Wednesdays from 2-3:30 pm only.
- Set up a voicemail in English and Spanish that will inform patients of phone hours.

- Create a poster with lab results interpretation.
- Add a QR Code to the poster for on line access.

6. **PLAN**

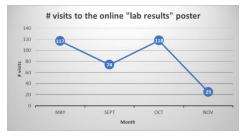
- Implement all TOC and document phone calls. related to lab results, to measure improvement.
- Inform patients of phone hours. Set up a voice mail to indicate phone hours.
- Display posters with interpretation of lab result and a QR code for on line access.

DO 7.

TOC put in place from Feb. 27 to Mar 6, 2019.

8. **STUDY**

The clinic received an average of 1-2 calls/day, during the designated phone hours, reaching their goal. The online poster accessed via QR code is shown below:



9. **ACT**

Based on the data, the team adapted the new process. They created an internal protocol with the streamlined phone result process and educated patients about lab result access via the portal and reinforced result interpretation via the poster and QR code option.

Next Steps

- Share the poster with all of the DPH SHC's.
- Poster QR code to point to a DPH webpage.
- Discuss with PHL and ORCHID team about a simpler display of lab results in the portal.

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