

Process Improvement

Improved processes in radiology unit to create financial savings and superior customer service

Mission/Purpose (Objective)

To improve Central Scheduling process for radiology appointments and reduce abandonment rate.

Business Challenge

The institution was losing significant revenue, approximately \$3 million annually, based upon an extremely high phone call abandonment rate of 15%. There were concerns by physician's offices that they were not receiving the level of service expected from the institution. For a healthcare system operating near breakeven, they additionally wanted to implement a central scheduling process that would allow them to grow their radiology business, an area that could significantly enhance the network's financial strength and enhance their competitive position in the marketplace.

Also critical to their growth were the relationships with physicians and their office managers, who have the capacity to drive referrals and volume. An enhanced registration model was needed to provide physicians greater control and secure loyalty to the system. A service-oriented culture is imperative, especially in central registration, which is the gateway to hospital services.

This strategic project had the impact to impact on physician strategy, volume strategy, culture strategy and financial health.

Description of Marketing Offering

Process Improvement - To design a new process for Central Scheduling; to recommend how staffing issues can address potential increase in throughput; to recommend resources including technology and capacity of machines; to provide customer service and process staff and management training; to create a new radiology dashboard to monitor new process

Process of Marketing Offering

Assessment:

SL&A did an assessment that included the following:
Meet with key doctor's offices that refer patients to the institution for radiology appointments; Interview personnel and physicians that interface with central scheduling; Develop a survey with both quantitative and qualitative questions to gain insights into how personnel and physicians that the current service and identify areas of opportunity; Interview and observe central scheduling personnel; Meet with IT and Imaging to receive feedback on their interaction with central scheduling; Investigate technology opportunities for the central scheduling organization.

Planning:

We established a Project Charter to clarify objectives. We reviewed documentation, processes, metrics and data to establish a baseline, Interviews were conducted (process, customer service, and technology). Gaps were identified and areas of improvement uncovered. Key findings were categorized into the following areas: Access to Central Scheduling; Representative handling, fax orders, services offered and Other.

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Implementing and Aligning

Recommendations were categorized based upon Staffing, Process/Procedure, Technology/System, Strategic/ and High,Medium/Low Priority for implementation. We trained the staff in registration best practices and a new registration model. We developed a dashboard for the Director of Radiology to manage the new process. We measured inputs/outputs of the registration process and developed a final registration document outlining the new registration process, staffing, resources and technology for increased throughput.

Client Testimonials/Results

The radiology scheduling phone call abandonment rate was decreased to the lowest rate ever, 4.9% from 15%. Of the 29 recommendations, a few are provided to reflect changes: New representatives were hired to handle incoming calls from physician's offices. An additional fax line was added to provide increased customer access.