2014 Gage Awards

| Reference # | 7403611 |
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| Status | Complete |
| Name of hospital or health system | Truman Medical Centers |
| Name of project | Increasing Access to Quality with One Call |
| CEO name | John Bluford |
| CEO approval | Check here to confirm that your CEO approves of this project being submitted for a 2014 Gage Award |
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| Within which of the two categories does your application best align? | Quality |

1. Provide a brief description of the project. (This section should resemble an abstract for a poster presentation or an abstract for a peer reviewed journal. Include an objective, data sources, study design, findings, and conclusions.)

A key complaint at Truman Medical Centers (TMC) Corporate Contact Center (CCC) was the patient's inability to schedule an appointment when needed. The CCC was designed to schedule appointments across 3 facilities, Hospital Hill, Lakewood and East-land, which is an offsite imaging center. The wait time to speak to someone was very long. When a patient was finally able to speak to an agent, the possibility of getting an appointment was very slim due to the availability of appointment slots, and the provider books only being available 6 weeks out. This resulted in a large number of guest relation complaints regarding our inefficiencies. We began the turnaround process by engaging patients and finding out what mattered to them. What would they like to see differently and how we can improve our service to them. With the feedback from our patients we developed a blitz program which allowed us to focus on a specific part of the call and listened for key words and phrases being used by the agents. We also empowered our agents to take full ownership of the patients' needs and go above and beyond, on every call, to ensure we met those patients' expectations. We also worked closely with our physician champions to get the books opened out 4 months and then later 6 months. After a lot of hard work both in the forefront and the back ground, we started seeing an increase in our answer rate, a decrease in our call wait times and most importantly, a decrease in our guest relations complaints. We were also able to see a higher appointment 'success rate' which meant we were getting patients in for follow up appointments and to see their providers in a timelier manner. This is very significant because it is directly related to the compliance and overall health and wellness of our community.

2. Describe the methods use in this project. Include where, why, and how the project was accomplished.

We at TMC are committed to Patient Centered Care and since the CCC was the front door to the organization this needed to change. The process was very frustrating for everyone involved, especially the patient. The patient is why we exist; therefore, we are here for the patients and understand that they deserve better. So the journey began.

With the patient in mind, we focused on the source of complaints. We found that frustration levels were running high on both ends of the phone and our agents were not being as inviting and friendly as the patients would have liked. We engaged our patients and their family with questions regarding their expectations when calling us. One of the biggest things we learned was that the patient just wanted someone to be compassionate and friendly with them without feeling rushed. They understood that they would not always get to see the provider when they wanted to, but wanted someone to work in their favor to get them the best possible outcome. With this information we developed our Quality Blitz. Every month, the management team focused on one aspect of the call. We asked out agents to say certain words and/or phrases throughout the call. This would also be tied to a new incentive plan that would allow agents to win points/prizes if we heard them use the phrase or say certain words. A blitz was done each month with each factor changing every month. Some examples of different aspects of the call include:

-Thanking the patient for choosing TMC for their care at the start of the call.

-Asking a question to the patient not related to the reason for the call before asking for their name and DOB. For Example – "Were you able to get out and enjoy the beautiful weather today?" -Repeating back to the patient the reason for their call. Shows an element of actively listening. For example – "Well Mr. Smith, I would be happy to help you schedule your follow up ENT appointment with Dr. Williams today. Let me see what I can find for you."

-Ending every call by saying "It is important to us that you keep your appointment. If for any reason you cannot do so, please call us back to reschedule 24 hours before".

3. Describe the results of the project. What data was used to support improvement results?

Once we started the project, we saw a slow but immediate increase in the data points for the Call Center. Those successes include July 2012 = 56% answer rate . July 2013 = 96% answer rate

July 2012 - 205 guest relation complaints. November 2012 = 0 guest relation complaints July 2012 - Average speed of answer = 9 minutes and 10 seconds. July 2013 = 38 seconds July 2012 - average handle time = 7 minutes. July 2013 = 4 minutes 11 seconds.

| 4. Describe what happened as a result of the project. Was the improvement related to the intervention? Can the project be duplicated by other organizations? | As a result of the project patients now get their calls answered in a timely manner, are able to get an appointment sooner than before and have an all around more pleasant experience as we believe the patient experience begins with the Contact Center. I strongly believe that this can be implemented at other hospital contact centers. The biggest part of the program was motivating the agents and helping them to understand that the patients are the reason why we are here and why we exist. |
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| 5. Describe how patients, families, and if appropriate, community was included in the work. | Patients and their families were included in the process by giving us their feedback. We had 1:1 phone calls with over 100 patients and asked them what they didn't like about the process. We took that feedback and developed our program around the patients needs. We asked them questions like, what does world class customer service look like? What could we have done better on your last call? Did you feel appreciated? What made you feel that way? We used this information to tailor the Quality Blitz program and also keep in touch with out patients ever so often to find out if we were getting better. I strongly believe that this |
| 5A. Attachment, if applicable (Applicable attachments include documents created for patients, families, or community members or by them as a result of the project) | ContactCenterGAGEAwardIMRAD.doc (230k) |
| Last Update | 2013-10-18 15:24:22 |
| Start Time | 2013-10-18 13:12:23 |
| Finish Time | 2013-10-18 15:24:22 |