

QI PROJECT: CONSUMER AND COMMUNITY SURVEYS

July 31, 2013

SELECTING THE PROJECT

- Gaps between desired and actual performance levels.
- Strategic connection
- Areas staff/clients think need improving
- Completed in 2-3 months?
- Completed successfully?
- Wow factor?
- Resistance from staff?

SUPPORT FOR SURVEY PROJECT

- A Strong QI team
- Accreditation support
- 4 benchmarks associated with this process
- Large gap between current and desired status
- Can be completed in 2-3 months
- Low resistances from staff
- Feedback from clients/community could help direct us to other QI areas/projects



DARE COUNTY
DEPARTMENT OF
PUBLIC HEALTH

ACCREDITATION PERSPECTIVE

- Benchmark 27.1
- Benchmark 27.2
- Benchmark 27.3
- Benchmark 30.8

TEAM DEVELOPMENT

- Quality Improvement Coordinator- Laura Willingham
- Health Education Specialist- Anna Schafer
- Accreditation Coordinator-Casey Morris
- Clinic Staff- Wendy Hall
- Front Office Staff- Jami Brown
- Environmental Health Specialist- Josh Coltrain

THE SURVEY SQUAD



Our team: Wendy Hall, Jami Brown, Josh Coltrain, Anna Schafer, Casey Morris, and Laura Willingham (honorary member: Dara Dockery, NCDHHS/WCH/Women's Health Branch)

WHAT ARE WE TRYING TO ACCOMPLISH?

- Better Feedback from our consumers and community.
- Better understand the needs of our consumers and community.
- Make improvements based on quality feedback to better meet the needs of our consumers and community
- Improve our survey tools
- Improve our survey processes
- Improve our survey analyses and change implementation

WHAT IS THE PROBLEM WE ARE TRYING TO FIX?

- Poor Survey tools
- Poor data collected
- Lack of consistent data collection processes
- Lack of process for implementation of improvements

WHAT IS THE OVERALL GOAL OF OUR PROJECT

- Collect and utilize feedback to make improvements to our department and services to better meet the needs of our consumers and community.

WHY IS IT IMPORTANT THAT WE IMPROVE THIS AREA?

- Improve quality of care
- Assure we are meeting the needs of our consumers and community
- To continue to improve our department and services
- Because we are not getting quality feedback from our consumers and community.

AIM STATEMENT

- We aim to improve our clinic consumer and community survey tools and data collection process (Phase 1) by August 2013, and develop a data analyses process and implementation of improvements based on quality feedback from our consumers and community (Phase 2) by January 2014. This is important because it will help us continually improve the services we provide to assure they meet the needs of our community. We will utilize QI methods and tools to understand our current process and identify ways to improve.

MEASURABLE OUTCOMES

Measure	Operational Definition	Baseline	Goal	Post data
Staff satisfaction with current surveys and processes	The opinion of clinic and HEO staff regarding satisfaction of the current process for collecting feedback from our patients and our community.	Patient: 28% of staff were satisfied with current process	40%	87.5%
		Community: 15% of staff were satisfied with current process	40%	87.5%

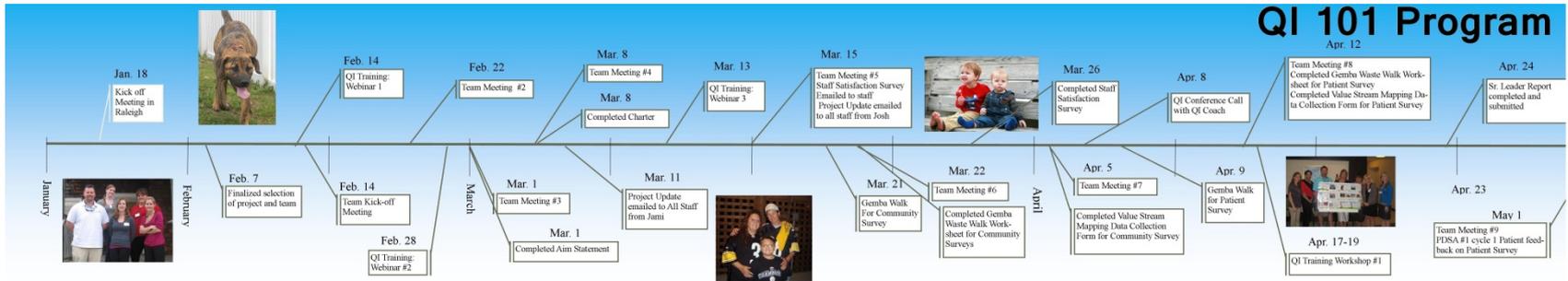
MEASURABLE OUTCOMES

Measure	Operational Definition	Baseline	Goal	Post data
Staff familiarity with current surveys and processes	The opinion of clinic and HEO staff regarding familiarity of the current process for collecting feedback from our patients and our community.	Patient: 54% of staff were familiar with the current process	60%	81.3%
		Community: 22% of staff were familiar with the current process	60%	75.1%

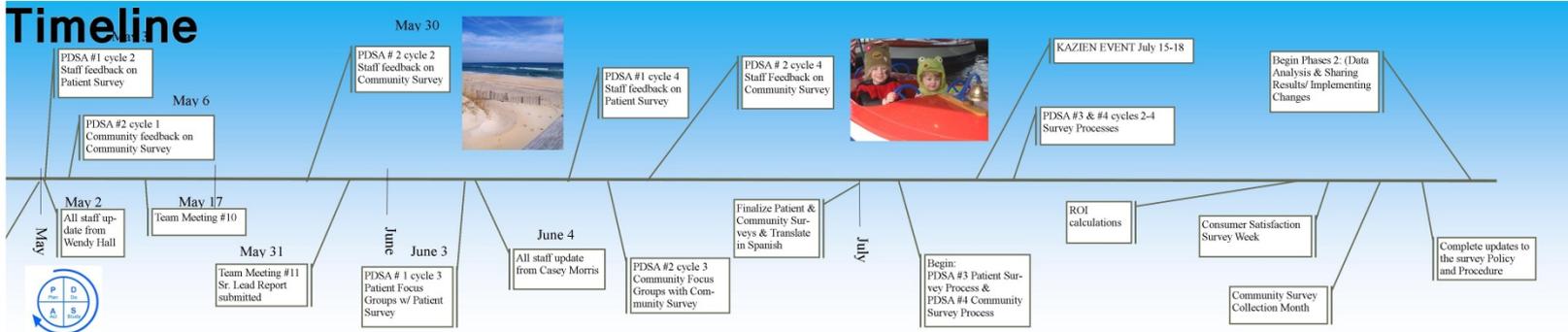
MEASURABLE OUTCOMES

Measure	Operational Definition	Baseline	Goal	Actual
Increase the number of consumer surveys completed	The number of physical Patient Input Surveys completed.	35	70	115
Increase the number of community surveys completed	The number of physical Community Input Surveys completed.	5	25	76
Increase the response rate of our community surveys	The number of Community Input Surveys completed compared to the number of surveys administered.	5%	50%	75%

PROJECT TIMELINE



Timeline



GEMBA WASTE WALK WORKSHEET: COMMUNITY SURVEY

WASTE WALK *Community input survey*

Area: *Community*
Date: *3/21/13*

Use the Waste Walk worksheet to identify wastes that you see.

OBSERVED WASTE	8 WASTES								IMPROVEMENT IDEA
	Defect	Overproduction	Waiting	Non-value added Processing	Transportation	Inventory	Motion	Employee Skill/knowledge	
<i>Survey is not user friendly, And there is inaccuracy / typos</i>	<input checked="" type="checkbox"/>								<i>Revise + Improve Survey</i>
<i>Overproduction of community surveys distributed vs completed</i>		<input checked="" type="checkbox"/>							<i>Improve distribution process to ↑ return rate</i>
<i>Approvals, Decision/selection of target audience, Process, return of surveys to many people w/ various tasks,</i>			<input checked="" type="checkbox"/>						<i>Streamline Process / Change Process to reduce waiting</i>
<i>No sharing of results, no changes</i>				<input checked="" type="checkbox"/>					<i>Est. Ownership of Project, reduce # of staff involved.</i>
<i>Excess of surveys / paper / supplies, surveys + project moved by staff</i>					<input checked="" type="checkbox"/>				<i>eliminate mailing process, ↓ paper</i>
<i>too many surveys vs. completed</i>						<input checked="" type="checkbox"/>			<i>↑ return rate ↓ wasted surveys</i>
<i>Too much searching for supplies, trips to store/post office etc...</i>							<input checked="" type="checkbox"/>		<i>Replace mail process</i>
<i>No ownership, tasks didn't match positions doing</i>								<input checked="" type="checkbox"/>	<i>Est. Roles + responsibilities + ownership, match to it. employees</i>

THE 8 WASTES	
DEFECT	Product or service that does not meet customer demand due to quality issue (include rework)
OVERPRODUCTION	Make more than, earlier than, or later than required
WAITING	Wait for equipment, supplies, people, test results, etc.
NON-VALUE ADDED PROCESSING	Effort adds no value to product or service from customer's viewpoint
TRANSPORTATION	Excess material movement
INVENTORY	Supply in excess of single-piece flow
MOTION	Any movement of people or machines that does not add value to product or service



GEMBA WALK

Community Input Surveys:

- There is a lot of people, materials, places, and waiting involved in the current process.
- There is no ownership of the process and task and positions do not match up ideally.
- There is so much room for improvement and this is demonstrated in the return rate of 5%.

GEMBA WASTE WALK WORKSHEET: PATIENT SURVEY

WASTE WALK

patient input survey

Area: Clinic
Date: 9/19/13

Use the Waste Walk worksheet to identify wastes that you see.

OBSERVED WASTE	8 WASTES								IMPROVEMENT IDEA
	Defect	Overproduction	Waiting	Non-value added Processing	Transportation	Inventory	Motion	Employee Skill/Knowledge	
<i>lost surveys, inadequate survey tool</i>	✓								<i>Review + improve survey, identify survey storage area</i>
<i>waiting BT giving out surveys, "to utilize the data"</i>			✓						<i>Establish a process</i>
<i>No value due to poor data collected</i>				✓					<i>Imp survey + process so changes/improvements can be made</i>
<i>Supplies in various locations staff have to walk to get</i>					✓				<i>Keep supplies readily available + in convenient location</i>
<i>Outdated version of survey mixed in surveys filed never used</i>						✓			<i>Update survey + only use new versions. All surveys stored together</i>
<i>Supplies in various locations</i>							✓		<i>Keep supplies readily available + in convenient location</i>
<i>No ownership, task don't match position assigned</i>								✓	<i>Establish roles + responsibilities match task to right position</i>

THE 8 WASTES	
DEFECT	Product or service that does not meet customer demand due to quality issue (include rework.)
OVERPRODUCTION	Make more than, earlier than, or faster than required
WAITING	Wait for equipment, supplies, people, test results, etc.
NON-VALUE ADDED PROCESSING	Effort adds no value to product or service from customer's viewpoint
TRANSPORT	Excess material movement
INVENTORY	Supply in excess of single-piece flow
MOTION	Any movement of people or machines that does not add value to product or service

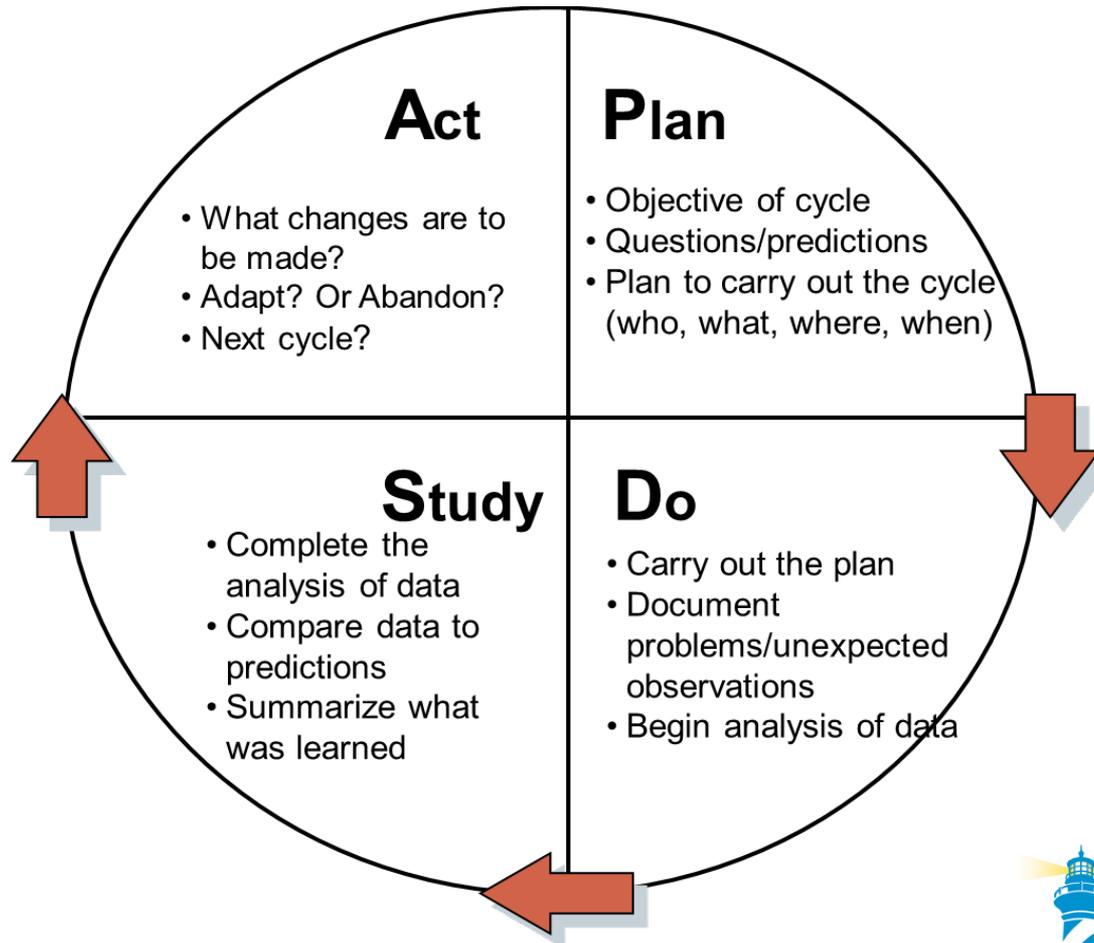


GEMBA WALK

Patient Input Surveys:

- Surveys are completed at checkout after the appointment and patient is ready to leave.
- Patients are not putting a lot of effort into the surveys and therefore the feedback is not quality.
- No consistent process in place for staff

PDSA CYCLES



PDSA CYCLES: CONSUMER SURVEY

- 1st PDSA Cycle 1- Consumer Survey, Get Patient feedback on survey.
- 1st PDSA Cycle 2- Consumer Survey, Get Staff input on patient survey
- 1st PDSA cycle 3- Consumer survey, Patient Focus Groups with “new” consumer survey
- 1st PDSA cycle 4-Consumer survey, Staff Focus Groups on “new” Consumer Survey

PDSA CYCLES: COMMUNITY SURVEY

- 2nd PDSA cycle 1-Community Survey, Get community input on community surveys
- 2nd PDSA cycle 2- Community survey, Get Staff input on “new” Community Survey
- 2nd PDSA cycle 3-Community survey, Test “new” Community Survey with Community Focus Groups
- 2nd PDSA cycle 4- Community survey, Test revised Community survey with final round of staff

PATIENT SURVEY

PATIENT INPUT SURVEY

Date: _____

Type of Visit (Please Circle One): Physical Female Annual Immunization WIC
 Laboratory Maternity Well Child Other

As part of our effort to improve our services, we would like your input about your experience in our clinics. Please respond to the following statements by checking the boxes that best match your answers. Thank you.

	Agree	Disagree	Not Sure
1. The location of the clinic is convenient for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. I am satisfied with the time it takes to get an appointment.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. The hours of operation are convenient for me.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. The wait time for my visit today was appropriate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. The professional who saw me today thoroughly explained the services I received.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. The office staff was pleasant to deal with.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Overall, I am satisfied with my visit today.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

8. How did you hear about our services? (please circle)

Friend/family member	Dare Co. Website	Referral from another provider
Health fair or other community event	Other _____	




A DIVISION OF THE DARE COUNTY DEPARTMENT OF PUBLIC HEALTH
 PO BOX 1000 109 EXETER STREET MANTEO, NC 27954 PHONE 252.475.5003 FAX 252.473.2153



PATIENT SATISFACTION SURVEY

Excellent service is our most important goal. Your responses are important to us and will help us improve our services. Thank you for taking our survey and sharing your ideas with us.

Date: _____

Today I visited the Health Department in: Manteo Frisco Kill Devil Hills

Type of Visit? Physical Female Annual Immunization WIC Lab
 Maternity Well Child Diabetes/MNT Other

Please check (v) how well you think we are doing in the following areas:	VERY GOOD	GOOD	FAIR	POOR	VERY POOR	N/A
	😊😊	😊	😐	😞	😡	
How satisfied were you with your visit today?						
RATING TODAY'S VISIT						
Ability to get an appointment						
Hours Health Department is open (8:00AM-5:00Pm, M-F)						
Convenience of Health Department's location						
Phone calls were returned promptly						
WAITING						
Length of time in waiting room						
Length of time in exam or interview room						
STAFF						
Friendly and helpful to you						
Listens to you						
Takes enough time with you						
Provides instruction you understand						
FACILITY						
Cleanliness						
Ease of finding the Health Department						
Comfort and safety while waiting						
Would you recommend the Health Dept. to your family/friends?	Yes		No			
Which Health Dept. location is most convenient?	Manteo	Kill Devil Hills	Frisco			
What do you like best about the Health Department?	_____					
What do you like least about the Health Department?	_____					
How did you first hear about the Health Department?	_____					
Suggestions/Comments:	_____					




SERVING TO ASSURE HEALTHY PEOPLE AND COMMUNITIES
 PO BOX 1000 109 EXETER STREET MANTEO, NC 27954 PHONE 252.475.5003 FAX 252.473.1141
 Revised July 2013



COMMUNITY SURVEY

Dare County Department of Public Health

Dare County Department of Public Health Public Input Survey

This survey is intended to find out how often county residents utilize the Dare County Department of Public Health services and to help us improve when and how we offer services. No need to put your name on this survey. Please place the completed survey in the enclosed self-addressed and stamped envelope and return. Thank you.

1. The Dare County Department of Public Health is open from 8:30AM- 5PM. How do you feel about the hours of operations?

- These hours are just right
- The Dare County Department of Public Health should be open earlier than 8:30AM
- The Dare County Department of Public Health should close later than 5PM
- There should be extended hours (after 5PM) at least one day a week
- I am not sure

2. How often do you visit or utilize services provided at the Dare County Department of Public Health (this includes services/ clinics such as pediatrics, dental, prenatal, family planning, environmental health, health education, dental)?

- At least once a year
- At least every other year, or two years
- I have not used the Dare County Department of Public Health in over 3 or more years
- I have never used the Dare County Department of Public Health

3. When answering the question above, if you checked that you have not used the Dare County Department of Public Health in 3 or more years, or that you have never used the health department, please tell us why by selecting from the answers below (you may check more than one answer)

- I have not used the health department because I have another doctor
- I have used the health department before, but I was not happy about the services I received
- I have not heard good things about the health department
- Other reason: Please list here: _____

4. What are some things that would make you more likely to visit the Dare County Department of Public Health?

- Extended hours
- Receiving more information about what all the health department offers
- There is nothing that would make me more likely to visit
- I think the health department should offer (please write your answer in below) _____

5. Would you be willing to help the Dare County Department of Public Health find ways to spread the word about the services that they offer, or to improve our services? If yes, please write your name and your phone number: _____

Thank you for completing our survey. If you have questions or suggestions, please call the Dare County Department of Public Health at 252-475-5003.

Pre

Post

COMMUNITY SURVEY

The Dare County Department of Public Health wants your ideas about how we can improve our services. Thank you for taking our survey. Your opinion matters!

Date: _____

1. The Health Department is open from 8:00AM-5:00PM. How do you feel about the hours of operation? Please check all that apply.

- The hours are just right. Other: _____
- The Health Department should be open earlier than 8:00AM. _____
- The Health Department should close later than 5:00PM. _____
- There should be extended hours at least one day a week. _____
- There should be weekend hours at least one weekend a month. _____

2. Have you ever used Dare County Health Department services, and if so, how often and which ones? _____

3. Please circle the Health Department location that is most convenient to you.

Manteo Frisco Kill Devil Hills

4. What would be the most effective ways to provide information about Health Department services to you? Please circle all that apply.

Newspaper Radio TV Website Facebook Mailed Letter

Brochures/Flyers Email Other: _____

5. What reasons would prevent you from using Health Department services? _____

6. What are some things that would make you more likely to visit the Health Department? _____

7. Comments: _____

Thank you for completing our survey. For more information, please contact the Dare County Department of Public Health at 252-475-5003 or visit www.darenc.com/health/.

[SERVING TO ASSURE HEALTHY PEOPLE AND HEALTHY COMMUNITIES](#)

PO BOX 1000 109 EXETER STREET MANTEO, NC 27954 PHONE 252.475.5003

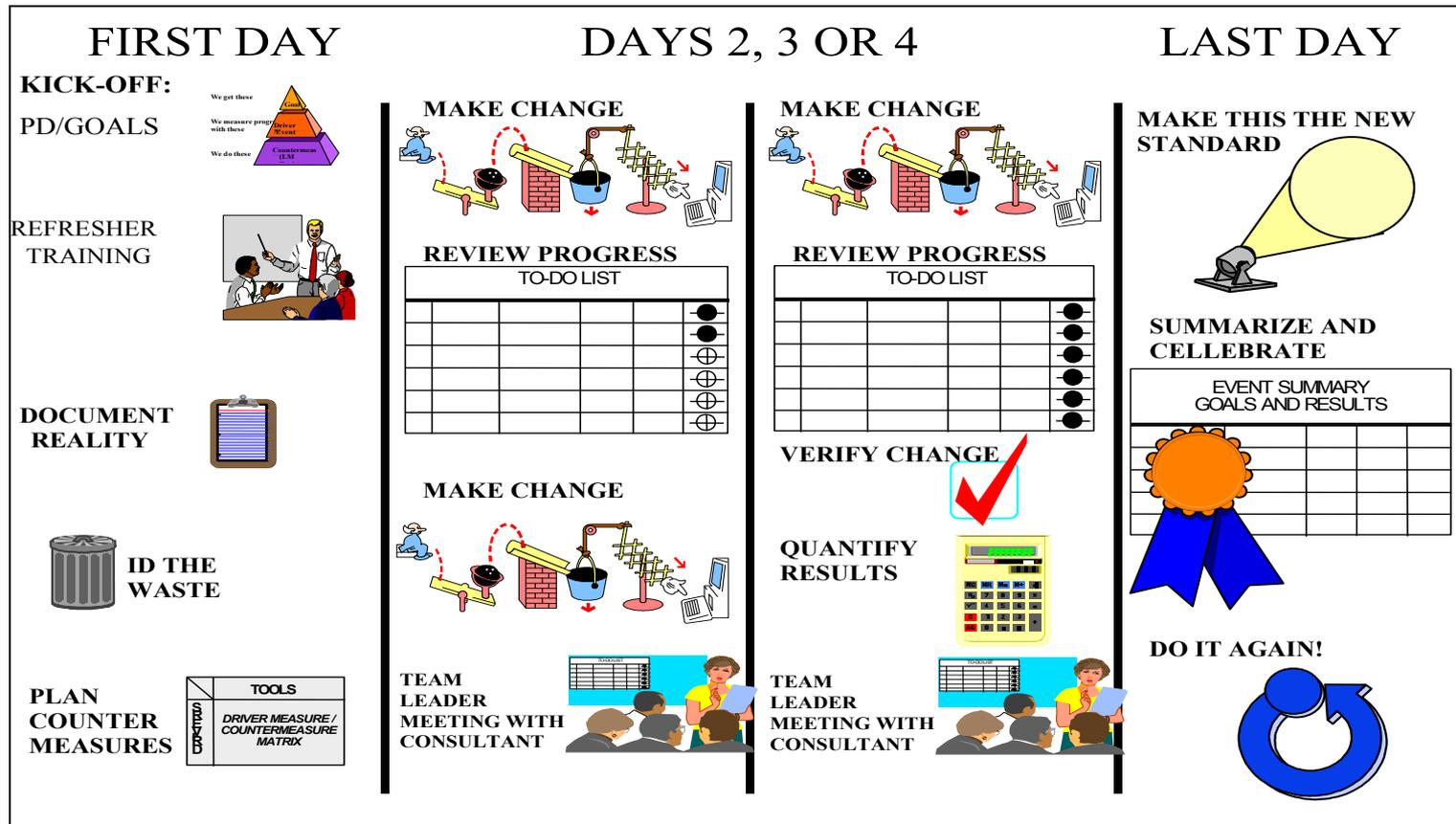
FAX 252.473.1141

Revised July 2013



DARE COUNTY
DEPARTMENT OF
PUBLIC HEALTH

KAIZEN EVENT



VALUE STREAM MAP



KAIZEN EVENT- KEY IMPROVEMENTS

- Patient Satisfaction Survey
- Community Survey
- Patient Survey Process
- Community Survey Process
- Patient Survey toolkits
- Consumer & Community Policy & Procedure
- Data analyzing and sharing process
- Process for Implementing changes from survey data
- Identifying Roles and Responsibilities



KAIZEN EVENT- KEY IMPROVEMENTS

- Patient Satisfaction Survey – New improved survey, toolkits provided, process supported department-wide, communication with all staff, & results shared with staff!
- Community Survey – New improved survey, colored copies put in school packets for completion and returned to school nurses!
- Data analyzing and sharing process- display results, email all staff, & placed on share drive!

NEWSPAPER

Kaizen Action Items

1

Team: The Survey Squad					Date: July 18, 2013	
No.	Action/Suggestion/ Recommendation	Person Responsible	Date/Time Due	% Complete	Resolution/Status	
1	Get HD Draft Brochure	Roxana	7/26/13	75%		Need to get finalized. Check reading level.
2	Check AA for clinic programs	Casey & Wendy	7/16/13	100%		Complete. No specific requirements.
3	Volume in Clinic	Jamie	7/15/13	100%		Complete. 130/week average in Clinic; 53/week average in WIC
4	Who owns current community/customer survey process? Robin for Consumer and Heo for Community survey.	Roxana	7/15/13	100%		Complete
5	WIC's Numbers	Jamie	7/15/13	100%		Complete
6	Community Survey-add note about return to school. Shorten 1st paragraph. Check reading scale.get Spanish version	Laura	8/1/13	100%		Complete
	Consumer survey-Add locations, check reading scale, eliminate question mark, change overall choice scale	Laura	7/16/13	100%		Complete
8	Add Community Survey dates in PA Plan. Add community Survey for NR. Consumer survey to events calender.	Laura	7/17/13	100%		Complete
9	Contact Debbie Dutton- see about adding community survey to this packet for 1 grade level only at all ES in DCS. Ask on how best to label to get it back from parents.	Roxana	7/17/13	100%		Complete

NEWSPAPER CONT.

Kaizen Action Items

2

10	Contact Amy M with Health W/ TF- add community surveys to the Hispanic work group	Roxana	7/17/13	50%		Amy has been emailed, no response yet. Amy restruned email- this group has not meet yet.
11	Draft P&P for Community and Consumer surveys.	Laura & Casey	7/17/13	100%		Approved
12	Draft checklist for Robin for completion of consumer clinic survey and provided to Robin	Josh, Wendy & Janie	7/17/13	100%		Complete
13	Draft Data reporting system plan	Anna	TBD	100%		Done
14	Develop Community Survey in survey monkey for website and facebook link and post.	Anna/Laura	7/17/13	100%		Complete
15	Table in lobby for "consumer Appreciation day"	Jamie	TBD	0%		Follow up with discussion
16	Create Tool Kit for Clinic staff for consumer survey dates	Laura	7/17/13	100%		Complete
17	Print out health department brochure (how many?)	Laura	7/18/13	0%		Waiting on brochure
18	Staff communication plan	Team	8/31/13	0%		Send out email to HD Share info
19	Setting up staff communication board in clinic	Laura/Roxana	TBD	0%		

NEWSPAPER CONTINUED

Kaizen Action Items

3

20	Post QI survey to staff	Team	12/1/13	0%		
21	Send Community survey out in school packets, enter and analyzes data, and share data	HEO	10/1/13	10%		
22	Conduct Patient Satisfaction Week Sept 16, 2013, collect, enter, analyze and share data	Clinic	9/16/13	0%		
23	Develop a Community Survey toolkit for events	Laura	8/10/13	0%		
24	Develop a Staff Input Survey and schedule	Anna/Laura	11/30/13	0%		

SUSTAINABILITY PLAN

- Established Roles & Responsibilities
- Document in Policies & Procedures
- Document in Job Descriptions
- Team supports initial year of project
- Team meetings 1x a year to review, update and tweak process
- Reminders are build into events calendar

NEXT STEPS

- Conduct Community Surveys in August 2013
- Conduct Patient Surveys in September 2013
- Support the implementation of the project
- Administer Post-Staff survey in December 2013
- Document presentation of data at staff meetings
- Identify future QI projects from the data collected
- Document implementation of improvements

LESSONS LEARNED

PATIENT SATISFACTION SURVEYS

- Communication was key.
- All staff emails and huddles were vital.
- More “Stars” and reminders needed to be provided in toolkits.
- Toolkits really helped staff feel supported.
- HEO role was important to lighten load on clinic and make them feel supported department wide.
- Providing incentives to patients as a thank you was very well received.

LESSONS LEARNED

COMMUNITY INPUT SURVEYS

- Get surveys to school nurses earlier.
- Don't rely on interoffice mail to school nurses at various school locations.
- Try to get a better idea of number of surveys needed-we underestimated.
- School nurses were asked to have all surveys turned in to HEO by a specific date so HEO knew when to expect them.

CONCLUSION/ SUGGESTIONS

- Staff gained QI skills
- Team approach worked well
- Regular Staff Communication worked well
- QI culture has improved
- Staff feedback is all positive
- Needed processes were established
- Sustainability is key