Greenbelt Profile: Jamie Perry, OT

A Value Institute Learning Center Publication

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Completing a greenbelt project as a clinician can be challenging undertaking given the balance between patient care and project work, but that didn't stop Jamie Perry, OT from taking on and completing his first Greenbelt project earlier this year.

Jamie began his career at Dartmouth-Hitchcock in Neurology assisting with electromyography and nerve conduction studies before transferring to the Department of Rehabilitation in 2001.

There he has been working as an Occupational Therapist with a certification in hand therapy (CHT). During his 17-year career at Dartmouth, Jamie has been involved in program development for the ALS clinic and the SHAKE (shared hand appointment) clinic, various initiatives in pulmonary and cognitive rehab, and other greenbelt -ed projects.

Jamie completed the online D-H Yellowbelt training and participated in other process improvement initiatives before applying for Greenbelt. "After years of having no clear method to address issues with our workflow, and seeing the same issues arise every few years despite changes being made, I began looking for a better way," says Jamie. What Jamie describes is not unusual, often well-meaning changes are made in the interest of providing better patient care or improving workflow for staff, and those changes do not always stick. This is what makes the DMAIC process, with an emphasis on the Control phase, so useful in making meaningful changes in the workplace.

Reflecting on his experience in Greenbelt class, Jamie says "I liked the group learning mentality. Yes we are all developing our own individual project plans, but we are also all learning the information at the same time. The different views help give insight into how others may process the information." He also highlights a couple of key takeaway messages from class that helped him throughout his project: "One, ideas drive project development but data tells the story. Two, change management is a constant process." And change management was one of Jamie's biggest strengths during the project. "Jamie set a tone of collaboration and process focus from his very first meeting," says his coach, Sam Shields. "This created the right environment for him to openly discuss change management issues with the team and address them proactively."

Jamie's project focused on improving the management of same-day business in the Department of Rehabilitation. "Call downs" occur when patients being seen in other clinics are referred for a same-day need in Occupational Therapy. While accommodating call downs is important for providing patientcentered care and for the business of Occupational Therapy, the existing process for managing these resulted in excessive patient wait times, staff dissatisfaction, and disrupted patient care for already scheduled patients. After many attempts to remedy this, it became clear that the DMAIC process would be helpful to clarify and remedy the problem.

"By using the DMAIC framework we were able to better understand the entire process, what data to gather, and what root causes needed to be addressed. The data showed that Rehab Medicine, Plastic Surgery, and Orthopedics were the main drivers of the process. Our team had members from all of these areas, which provided great insight into the entire process within and between departments. We developed a simple decision tool and educated staff on the new process. Initially our wait time for call down business was an average of 67 minutes. Our patients wanted to wait less than 25 minutes. We were able to reduce it to 23 minutes. Our average monthly number of call downs was 15, and has been reduced to less than 7. We have a control plan in place for ongoing education of new staff and quarterly review of the decision tool in the departments. We receive monthly data on wait times and the number of call downs directly from Vista reporting," Jamie explains. And while they were able to reduce the number of call downs, they have not lost any business. They now have a

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plan for ensuring that patients are scheduled ahead of time whenever possible to provide the best patient experience.

While Jamie's leadership was paramount, he is quick to credit the support of his team and his coach for the success of the project. "My team members were willing to assist with anything I could throw at them: gathering data, educating staff, baking cookies; it was great." While the implementation phase of the project took a few iterations to find the most impactful solution, his team remained engaged and supportive throughout the process.

As he looks ahead to future work, Jamie has already identified other project opportunities in his area. In addition, the tools are now a part of his day-to-day work. "I don't think of it as future work. I think of it as ongoing. I find myself seeing 'waste' in other daily processes and do a little PDSA. I have become more aware about tracking data for possible future changes and consistently think about how to 5S our department. I use the terminology daily. When discussing ideas or problem solving with colleagues, I often suggest a tool or method of data tracking to assist," shares Jamie. This is what a true leader and practitioner of continuous improvement looks like.

