



## Streamlining Process Improvement Identification and Resolution in a Hospital-at-Home Care Model

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**Background:** As part of the Virtual Care Platform at Mayo Clinic, Advanced Care at Home orchestrates the delivery of necessary services by leveraging an ecosystem of suppliers and virtual connections. Under the direction of a physician-led command center, acute but stable patients using wearable technology can receive hospital-level care in the comfort of their own home. Advanced Care at Home launched in Florida, Arizona, and Wisconsin, supporting a supplier network of approximately 50 different vendor partnerships of 18 different service lines (nursing, phlebotomy, pharmacy, imaging, etc.). Maintaining an extensive network of partners to provide a coordinated and seamless experience to patients demonstrated the need for a resource or tool to efficiently document opportunities for improvement with the various suppliers involved in caring for Mayo Clinic patients.

Traditional incident reporting in the brick-and-mortar hospital did not accommodate for improvements to innovative care models or service providers external to Mayo Clinic. A rudimentary process was established early in the programs inception but was unable to sustain the volume causing turnaround delays and inconsistencies in issue lifecycle completion.

**Objective:** The aim of this project was to standardize and streamline the intake of new opportunities driven by front-line staff identification and simplify the process for resolving issues including, the investigation and closed loop communication. The desired outcome was to decrease the process time for quicker turnaround and increase the completion of incident reporting follow-up.

**Planning/Research Methods:** The Mayo Clinic Advanced Care at Home team and Medically Home group collaborated to implement a system to increase efficiency and expand reporting on service delivery, workflow, and customer service issues based on the feedback from key stakeholders across disciplines in the command center and supplier network. Through a brainstorming session, gaps in the current process were discussed and a future state process and project plan was designed to translate the improvement idea to actual operations. Specific process improvement themes and actions identified included:

- **Embed incident reporting in user interface:** Develop a standardized intake form that is quickly accessible in the software clinicians leverage to coordinate care and connect virtually with patients.
- **Streamline a comprehensive back-end process:** Create a workflow that triages and tracks an identified issue from submission to assessment and resolution.
- **Ensure robust closed loop communication:** Drive execution through the reviewer connecting with the applicable service provider depending on the results of the assessment and sharing outcomes with the staff member who submitted the intake form.

**Implementation Methods:** The cutover date for the submission form and triage tool was September 2022. To ensure a smooth transition, education and training was tailored to different end-users and offered one month leading to the hard launch. Baseline metrics were gathered to evaluate the 4 months preceding (May 2022 – August 2022) the new process and the workgroup remained active to monitor the gains made month over month. A comparison for 4 months pre- and post-implementation was conducted to assess the effectiveness of the work. The original process for incident reporting was disabled with direction that guided teams back to the new system to promote adoption.

**Results:** Within the 4 months following implementation, the team realized an 82%-time savings for issue submission with the intake form embedded in a central resource and an 84%-time savings in the issue triage step through workflow and resource efficiency. On average between May and August 2022, 57% of issues did not complete the issue lifecycle process while only 27% of issues did not make it through the lifecycle process between September and December. Improvement was observed even within the new incident tracking process as the team grew in comfort with the workflow. The average turnaround time from submission to issue resolution has decreased between September (23.3 days) to December (11.9 days). A dashboard displaying key metrics was developed to sustain these gains.

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