



Finding Hidden Capacity

If your team hasn't started doing QuickStart--you should!

Introduction

If you want to be successful at finding hidden capacity, you must stop the bleed of appointment slots at the start of each session as *everyone waits for everyone else* to do something before they begin with patients. As a team you have to see the benefit for patients and embrace the short term risks associated with changing behavior. As a management team, you have to be willing to demand value from each employee.

QuickStart requires staff and providers to start working from the moment they arrive at work and the assumption is that they will arrive on time. Then, QuickStart employs an “all staff to the front” mentality. The first patients are sought out, brought back, registered and examined—doing vitals and all visit care. As the title implies, this all happens with urgency—urgency of the feet, but most importantly urgency of mind.

Action

Do a little look-see to see if QuickStart is happening at your clinic. Managers, you are the perfect candidates to do this. Of course, you have to be sure that you are in clinic at the start of the session (a.k.a. at the time of the *first* appointment). For this brilliantly illuminating exercise, just walk around to each exam room with the following worksheet (or a notepad) and a pen.

The minute the session starts, walk around noting each exam room number and the provider/MA/Nurse team using that room(s). Now, put an X under the time and across from every exam room number that has ***a patient AND a provider in it together***. Don't assume that a closed door means that behind that door a patient is being 'seen' by their clinician. Instead, listen at the door if you need to--be sure to get this right. If there is *only* a patient in the room (indicating that the support staff has roomed the patient) then you get no X. At best you can put a / in that box across from that room number.

Now, walk through the clinic fifteen minutes later (or more frequently if you are in disbelief and still need to convince yourself that nothing is really happening in the back for patients). Again, put an X under the time heading across from the ***rooms that have a patient AND a provider*** and just a / across from the rooms with only a patient. Continue this process for the first 75 minutes of the clinic session.

Soon you'll see patterns. For most of you, we already know what you are going to see. Your worksheet will look like a tic-tac-toe game where X's hardly show up.

If we were to write an X for every staff member in an exam room waiting or doing things not related to the patients currently out front waiting for us, then we'd all be winners at this game. *All of us except of course, the patient.*

Sample Table

Provider	Exam Room Number	8:15 am	8:30 am	8:45 am	9:00 am	9:15 am	9:30 am	11:00am	11:15am	11:30am	11:45am
		Indicate an x for each room that has a patient AND a provider in it. Indicate a / for each room that has just a patient in it.							Soft Landing -- Indicate the number of patients still to be seen. Engineer a soft landing to the current session to guarantee a crisp start to the next.		
MA Dr. E § Luz	7	--	/	/	X	X	X	4	3	2	1
	8	--	--	/	/	X	X				
	9	--	--	--	--	/	/				
Dr. Gupta § Janine	2	--	/	/	X	X	X	5	3	1	
	3	--	/	/	/	X	X				
	4	--	--	--	/	/	/				
Nancy, NP § Yvette	5	--	/	X	X	X	X	3	2	2	0
	6	--	/	/	X	X	X				
	Procedure room	--	--	--	--	/	/				

As you can see, you can monitor and then watch for trends in both your Real Estate and your Patient Care Teams to see who is getting started on time, from a patient’s perspective and in terms of their appointment time.