Holden Comprehensive Cancer Center:  
Oncology Registry Quality Management System and Waste Reduction  
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Description & Background

Gap & root cause analysis demonstrated an area of improvement through standardization of workflow, reduction of process waste and development of a more robust quality management system for the Oncology Registry Program.

Aim

Reduce the burden on current staff, allow for setting clear individual and team goals, build strong team dynamics and assist in right sizing the staffing model to meet overall work demand.

Targets include:
- Standardize workflow for abstracts focusing on accurate & efficient data collection
- Reduce system wait by leveraging technology
- Reduce process waste
- Create system for corrective action planning
- Utilize current and future resources effectively and efficiently to track and meet Standards.

Intervention

Using quality, lean and six sigma strategies analysis, improvement and system creation occurred. Current state process maps captured variation in workflow. Individual assessments provided evaluation of use, demand, and daily work target creation. Morphing maps and a Bone diagram assisted in working through creation and improvement processes. System waste was identified through process maps, standards review and institutional goals.

Measure

Gemba observations occurred to assist with identification of system waste & collection of cycle time data. Processes were mapped and baseline data collected to capture current state.

A total quality management system was created that meets standards & institutional goals. Areas of focus included:
- Standardization of data collection entry
- Productivity & quality benchmarks were created to meet institutional goals
- Quality Summary is provided utilizing individual performance scorecard, peer review methodology & a department dashboard
- Corrective action planning is utilized for identified improvement targets

References

- Gemba Kaizen Second Edition: Masaaki Imai; 2012
- Tool Time for Healthcare Version 12.1; Langford International, Inc.; 2010

Conclusion & Results

- Workflow standardization & waste reduction lead to an average of 22 mins per abstract in time savings, with additional improvement upon implementation of leverage technology
- Team members created department targets for productivity with guidance on daily demand
- Department Dashboard created & implemented in program evaluation capturing key performance indicators with process, satisfaction and outcome measures
- Quality performance summary created & implemented with targets for corrective action planning. System for corrective action resolution created & implemented