FIELD NOTES

Zooming in on industry-specific issues

CASE STUDY

Follow-Up Visit Alook back and ahead at the Joint Commission's RPI culture by Patty Chappell

Editor's note: In June 2016, *Quality Progress* highlighted the Joint Commission's Robust Process Improvement (RPI) program, which trains employees in lean Six Sigma and change management techniques toward improving the quality of internal processes. Since then, RPI has become the organization's chief quality and process improvement methodology—saving staff time, improving outcomes and creating financial efficiencies. During the COVID-19 pandemic, RPI has allowed the organization to adapt quickly and continue business operations.

he Joint Commission, the world's leading healthcare accreditor, established its robust process improvement (RPI) department

12 years ago. Our experience developing this department—with the mission to train staff in lean Six Sigma and change management—can be an example for other organizations to build on.

Today, nearly 94% of the Joint Commission's staff receive some type of RPI training, whether it's Yellow Belt, Green Belt (GB) or change agent certification. Many boast dual or triple certifications, and quality and process improvement is incorporated into all phases of our operations.

Aggressive approach

We've recently seen a shift in how employees across all areas use RPI. We no longer announce that we're using RPI—we just do it. RPI is the way we work and has become part of our culture.

The RPI department takes an aggressive strategy toward quality improvement. Two staff members from the department are assigned to each enterprise leader to engage with on strategic projects. RPI staff is collaborating and facilitating about 40 projects. Some of our best RPI work is the most recent:

- Along with the digital marketing team, we developed an efficient process for updating and maintaining the Joint Commission's four enterprise websites. We facilitated 100-plus meetings with internal and external stakeholders using RPI tools, including an impact assessment, stakeholder analysis and VOC.
- With the IT department, we facilitated the replacement of 1,500-plus staff computers

in a six-month timeframe—guaranteeing all staff members received the new devices and training to use them.

To ensure RPI was incorporated during the on-site review or survey process of healthcare organizations, we worked with surveyors using a fishbone diagram to identify the root causes explaining why the

tools weren't being used. Identified causes all pointed toward the need for better education and training on the tools, and their applicability in the field. The RPI and surveyor teams brainstormed how to address this education gap and implemented training solutions to close the shortfall.

In addition to these projects, since 2014, the President's Challenge encourages staff to submit examples of a new process improvement. Projects are recognized based on quality and effectiveness. To date, 82 individual and group projects have represented more than 1,500 process steps eliminated and 44,000 process hours saved. Notable projects include:

- On-site survey file review. The manual collection, printing, organizing and storage of survey records for some on-site surveys was time consuming. A new process enables the electronic collection and review of these files. Turnaround time was cut by eliminating all manual preparation time and associated wait time. Eleven process steps were eliminated, and 930 staff hours were saved annually.
- Reducing computer phishing threats. Phishing is one of the biggest security threats to any organization. We implemented several solutions, including training, reporting of phishing attempts and screening for phishing emails. Training influenced a reduction in employees entering name and login information on test phishing emails from 42% to 8%, as well as reducing the percentage of employees clicking on test phishing emails from 45% to 24%. Five process steps were cut, and 218 staff hours were saved annually.
- Document submission process and late follow-up.

The process for notifying organizations that documents were due for submission was manual and ineffective. We improved the process by providing an automated email 30 days before the due date, on the due date, and at 30 and 60 days past the due date. Also, the "What's due?" dashboard on our customer extranet site now displays a reminder that documents are due or past due with the number of days late displayed in red. An automated report of late submissions also replaced a manual spreadsheet. Seven process steps were eliminated, and 366 staff hours were saved annually.

■ Improve the onboarding process for data submission platform. A department was working with an outside vendor to transition hospitals to directly submit electronic clinical



Read "How We Work," the QP article that described the Joint Commission's journey to improve internal operations and encourage wide use of quality tools, thereby creating a pervasive quality of culture. Visit https://tinyurl.com/yxvwtmen to access the eight-page feature from June 2016.

quality measure data through a platform. More than 950 hospitals were onboarded to the platform in 2019. But the project team concluded the existing onboarding process would be cumbersome considering that an additional 2,500 organizations needed to be onboarded the next year. The team revised the

onboarding process using an online survey tool for data, allowing for a streamlined automated interface that eliminated manual data entry errors. Two process steps were cut, and more than 427 staff hours were saved annually.

RPI during COVID-19

The benefit of successfully establishing a strong RPI culture has become evident during COVID-19. Like most organizations, the Joint Commission was affected significantly during this unprecedented time. RPI, along with several video conferencing apps, permitted countless meetings, projects and operations to forge ahead. RPI meeting facilitation tools and techniques proved flexible in the new reality. When the most basic environmental aspects changed, RPI remained constant.

The RPI department united the Joint Commission enterprise during COVID-19 through "8:45 Live With RPI!" a bi-weekly, 15-minute livestreamed show to engage employees as they worked remotely. An average of 245 employees from around the globe attended each session, and presentations were made available via on-demand replays. Each show touched on some aspect of commingling RPI and remote work.

We also adapted to offer our annual change agent and GB training virtually. Thirty-five employees (19 change agents and 16 GBs) completed classroom training and have begun work on required projects to get certified. Training staff 100% virtually didn't reduce our capacity, but actually increased it.

What's next?

Today, Joint Commission staff expect that when RPI is involved in a project, great results await. Our organization is proof that RPI works. It engages employees, solves complicated problems, and saves time and money. I look forward to seeing how RPI further evolves during the next 12 years. QP



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