Facility	Dept	Project Result	Start Date	End Date	Year	Category	Goal	Baseline Data Descriptor	Baseline Data	Result Data	Goal Cont Achieve Susta d? d?	ine Other Results
MLK- MACC	GI	Established reminder calls to reduce broken appointments.	Oct-14	Dec-14	2014	No show reduction	To decrease and maintain no show rate to less than 20% by December 31, 2014.	% patients no showing	31%	13%	yes	
MLK- MACC		Increased critical C-CAHPs measure from 60% to $100\%$ : percent of patients saying they saw their provider within 15 minutes of provider time.	Oct-14	Nov-14	2014	Wait time reduction	To increase from 60% to 75% percent of patients who report seeing their provider within 15 minutes of appointment time.	% of patients reporting seeing their provider within 15 min.	60%	100%	yes	
MLK- MACC	Orthopedics	Reducedaverage total cycle time from 3.2 hours to 1.7 hours.	Feb-14	Nov-14	2014	Cycle Time - clinic visit	Reduce cycle time from 3.2 hours to 2.5 hours	Cycle time hours from check- in to discharge	3.2	1.7	yes	
MLK- MACC	Orthopedics	Reduced no show rate from 36 to 24 percent.	Oct-14	Nov-14	2014	No show reduction	Reduce no show rate from 36% to 20%	Percent of patient no shows.	36%	24%	no with improve ment	Polled no shows to find out why they no showed: 1. forgot, 2. sick, 3&4: conflict with another appointment
MLK-OC	Pulm Lab	Patients insurance was checked day before so that people would not be canceled when they came in for lack of insurance - and decreased broken appt 34%	Aug-14	Nov-14	2014	Business Practices	PRW will verify patients insurance prior to visit in order to reduce cancelled appointments.	Percent of broken appointments	42%	8%	YES	December 2014 BA went up to 33% again - investigating why
MLK- MACC		Reduced cyce time b/t registration and vitals from 23 to 3 minutes!	Aug-14	Sep-14	2014	Cycle time - registration to vital signs	Reduce cycle time between registration and vital signs from 23 minutes to 10 minutes	minutes	23.00	3.00	yes	
MLK-OC	Women's	Patients average latency between appoint time and registration was reduced from 40 min to 18 min.	Jul-14	Aug-14	2014	Latency	Patients will be registered within 15 minutes of their appointment time	Latency / wait time - average minuets	40	18	yes	
MLK- MACC	Heme/Onc	75% of patients report seeing provider within 15 minutes of appointment time, from 45%.	May-14	Jul-14	2014	Patient Satisfaction	To increase patient satisfaction with seeing provider within 15 mintues from 45% to 65%	Department administered survey - % of respondents saying yes to seeing MD	45%	75%	yes	
MLK- MACC	Peds Hub	Decreased 8am patient wait time from registration to exam room from 45 min to 10-25 min.	Jan-14	Jul-14	2014	Cycle time - registration to vitals	Decrease 8am patient wait time for exam room by $30\%$	Cycle time minutes from registration to exam room for 8am patients	45	10 to 25 min	yes	
MLK-OC	ENT	Number of patients seen per month decreased (due to insurance changes that occurred with ACA /MediCal expansion).	Jan-14	Jun-14	2014		4G ENT clinic will increase volume of patients seen in ENT clinic from 780 pts. (baseline data = average of January thru December 2013) to increase 5% (819	# patients seen per month	780	712	NO	
MLK- MACC		Reduced number of minutes that surgeries were starting late. $% \label{eq:control_eq} % \label{eq:control_eq}$	Feb-14	May-14	2014		Average start time latency - improvement - Goal not well defined	Average minutes after scheduled time that procedure begins.	49	37	no with improve ment	
MLK- MACC	ASC	Decrease cycle time in pre-op care unit from 161 minutes to 126 minutes	Feb-14	May-14	2014	Cycle Time - pre-operative	Decrease cycle time in pre-op care unit from 161 minutes to 120 minutes	Cycle time minutes from registration to operating room	161	126	no with improve ment	team noted #1 cause of OR delay is surgeon arr'ing late
MLK- MACC	Dental - OMFS	Reduced cycle time between registration and vital signs from 22 minutes to 8.4 minutes	Jan-14	Apr-14	2014	Cycle time - registration to vitals	Reduce cycle time between registration and vital signs from 22 minutes to 11 minutes	Cycle time minutes from registration to vital sign completion	22	8.4	yes	
MLK- MACC	Derm	Decreased no show rate for Dermatology procedures from 32.5% to 28.7%	Feb-14	Apr-14	2014	No show reduction	Decrease 'clinic 23' no show rate by 10%	% patients no showing	32.50%	29%	no with improve ment	
MLK- MACC	EVS	Improved average cleanliness scores for four high-traffic restrooms from 93.9% to 97.5%	Mar-14	Apr-14	2014	Cleanliness	Improve average cleanliness scores for 4 high-traffic restrooms by 5%	Average cleanliness score	93.90%	97.50%	no with	
MLK- MACC	Orthopedics	MD to Final Dispo time reduced from 20 to 8 minutes.	Feb-14	Apr-14	2014	Cycle Time - MD to disch	Reduce MD to Final Dispo time by 50%	Average minutes from MD to Dispo	20	8	yes	
MLK- MACC	Pulm Lab	Increased the percent of patients who are asked to verify their contact information from 68% to 83%	Oct-13	Apr-14	2014	Patient contact info	Increase the percent of patients who are asked to verify their contact info by 10%	% patients whose contact info is verified by clerk	68%	83%	yes	
MLK- MACC		Increased the percent of patients who see their provider within five mnutes of their scheduled appointment from 62% to 80%	Dec-13	Mar-14	2014	•	Increase the percent of patients who see their provider within five mnutes of their scheduled appointment from 62% to 70%	% patients who see provider within 5 minutes of appt.	62%	80%	yes Aug	-14 SUSTAINED March-August 2014!
MLK- MACC	Endo	Increased number of patients by 32 for month.	Dec-13	Feb-14	2014	Productivity	Increase number of patients seen per month from 723 to at least 800	Number of patients seen per month	723	755	no with improve ment	
MLK- MACC	Orthopedics	Reduced average number of patients who present to clinic without a scheduled appointment from 20/day to 1/day.	Nov-13	Jan-14	2014	Patient scheduling	Reduce number of patients who present to clinic without a scheduled appointment from 20/day to 6 or less/day.	Number patients/day who present to clinic w/out appointment	20	1	yes	
MLK- MACC	Rehab	Decreased no shows in physical therapy from 23% to 7%	Aug-13	Jan-14	2014	No show reduction	Decrease no shows in physical therapy by 10%	No show rate	23%	7%	yes Oct-	SUSTAINED for PT - 10% No show Rate October 2014
MLK- MACC		Decreased cycle time from provider to final discharge from 77 to 59 minutes.	Oct-13	Jan-14	2014	Cycle time - provider to discharge	Decrease cycle time from provider to final discharge by 10%	Average Cycle time minutes from provider to final discharge	77	59	yes	
MLK- MACC		Increased RN and provider handwashing before & after examining the patient from 85% to greater than 100%.	Sep-13	Dec-13	2013		Increase RN and provider handwashing before & after examining the patient from 85% to greater than 90%	% RNs & providers washed hands before & after patient exam-patient survey	86%	100%	yes	

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Facility	Dept	Project Result	Start Date	End Date	Year	Category	Goal	Baseline Data Descriptor	Baseline Data	Result Data		Control? Sustaine d?	Other Results
MLK- MACC	Heme/Onc	Increased the percent of patients who are asked to verify their contact information from 79.6% to 100%.	Sep-13	Dec-13	2013	Patient contact info	Increase the percent of patients who are asked to verify their contact info	% patients whose contact info is verified by clerk	79.6%	100%	yes		
MLK- MACC	Women's	Increase the percent of patients who are asked to verify their contact information from 40% to 85%	Sep-13	Oct-13	2013	Patient contact info	Increase the percent of patients who are asked to verify their contact info	% patients whose contact info is verified by clerk	40%	85%	yes		
MLK- MACC	Pulm Lab	Decrease no show rate from 44% to 21%	Jan-13	Jun-13	2013	No show reduction	Decrease no show rate by 10%	% patients no showing	44%	21%	yes	Jan-14	Tracking showed higher no shows - have restarted project
Harbor	6E Peds	Increased by 150% the number of discharges happening before 2 PM, improving patient flow from ER to 6E, and decreasing unmanageable workload for evening shift.	May-11	Jul-12	2012	Cycle Time - discharge	Increase percent of discharges that happen before 2 PM by 100%.	Percent of discharges that happen before 2 PM.	19%	50%	yes		
Humphrey	Adult Clinic				2012		Reduce cycle time by focusing on post-counseling time.	Range in minutes of wating time.	30 to 120	10 to 20	yes		Focussed on decreasing post- counseling time.
Long Beach	Adult Clinic				2012	Cycle Time - Clinic Visit	Decrease cycle time.	Average minutes of clinic visit for patient.	105	65	yes		
MLK- MACC	ASC	Number of patient seen pre-op evaluation unit remained the same.			2013	Productivity	Increase number of patient seen pre-op evaluation unit from 10 to 15 patients per day	# patients seen per day	10.2	10.3	no		team noted rate of incoming referrals decreased during the project
MLK- MACC	ASC	Decreased cycle time in pre-op evaluation unit from 182 minutes to 91 minutes			2013	Cycle Time - clinic visit	Decrease cycle time in pre-op evaluation unit	Cycle time in hrs:min from check-in to discharge	3:02	1:31	yes		
MLK- MACC	ASC		Aug-14		2014	Punctual Start Project	Reduce first case tardiness from 59% to 45%	percent of cases that start late	59%	49%	TBD		
Harbor	Clinic B				2012	Cycle Time - Clinic Visit	Decrease overall cycle time by increasing provider rooms from 1 to 2 rooms.	Baseline is 1 room, result is 2 rooms. Hr:min	2:14	1.58	yes		Overall data skewed because of a new batch of interns. Project stopped.
Harbor	Clinic B				2012	No show reductions	Decrease bad appointments.	No show rate	26%	6.00%	yes		
MLK- MACC	Dental - OMFS	Reduced the number of patients who present to clinic without a scheduled appointment from 44% to 20%			2013	Patient scheduling	Reduce number of patients who present to clinic without a scheduled appointment from 44% to 20%	Percent of patients who present to clinic without an appointment	44%	37%	no with improve ment		team could not change clinic profiles
MLK- MACC	Dental - OMFS	in progress	Aug-14		2014	Cycle time	Decrease recovery time of OMFS patients placed under general anesthesia to less than 1 hour in 6 min.	Cycle time			TBD		
MLK- MACC	Dental - OMFS		Oct-14		2014		Decrease no show rate from 41.2% to 20% by November 30th, 2014.	percent of no shows	41%		TBD		
MLK- MACC	Derm Clinic	Overall no show rate went up from 40.6% to 54%			2013	No show reduction	Decrease no show rate to 34%	% patients no showing	40.60%	54%	no		
MLK- MACC	Dollarhide	in progress			2013	Productivity	Increase average number of patients seen per hour from 1.6 to 2.0	Average # patients seen per provider hour	1.6	in progress	TBD		
MLK- MACC	Dollarhide	Reduced wait time for new patients between registration and vital signs from 20 minutes to 10 minutes			2013	Cycle time - registration to vital signs	Reduce wait time for new patients between registration and vital signs	Average wait time minutes between registration and vital signs	20	10	yes		
MLK- MACC	Endo /DM	Decreased the number of patients per month who are non-compliant with medications from 21 to 16			2013	Patient care	Decrease the number of patients per month who are non-compliant with medications from 21 to 16	Number of patients per month found to be non- compliant	21	7	yes		
MLK- MACC	Endo /DM	Decreased the percent of patients who wait more than 30 minutes for registration from 50% to 35%			2013		Decrease the percent of patients who wait more than 30 minutes for registration by 25%	% patients waiting 30 minutes or more to register	50%	35%	yes		
MLK- MACC	Endo /DM		Nov-14		2014		To decrease and maintain no show rate of patients with Diabetes from 16% to less than 10%.	% no shows	16%	15%	TBD		
MLK- MACC	ENT	Achieved 100% compliance for quality & safety assurance checks before administering allergenic extract to patients (x5 months & counting)			2013	Patient safety	Achieve 100% compliance for quality & safety assurance checks before administering allergenic extract to patients. Did not previously have safety	% compliance to check-list - over 5 months	n/a	100%	yes		
MLK- MACC	ENT	Decreased cycle time between registration and provider on Thursday afternoon clinic (the busiest time for ENT) from 27 minutes to 11 minutes			2013	.,	Decrease cycle time minutes between registration & provider visit to 15 min or less on Thursday afternoon clinic (the busiest time for ENT)	Cycle time minutes from registration to provider	0:27	0:11	yes		
MLK-OC	ENT		Aug-14		2014	No Show	To Reduce average no show rate of 25% to less than 20% by 12/15/14.	% no shows	25%	21%	TBD		

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Facility	Dept	Project Result	Start Date	End Date	Year	Category	Goal	Baseline Data Descriptor	Baseline Data	Result Data		ntrol? staine Other Results d?
MLK- MACC	EVS	Decreased non-emergency service calls from 19.5 to 14.5 per week			2013	Cleanliness	Decrease non-emergency service calls by 20%	Median non-emergency service calls per week	19.5	14.5	yes	
MLK- MACC	EVS	*TBD* Decreased bathroom cleaning time from 20 min to 13.25 min in their pilot study	May-14		2014	Cycle time - cleaning	Decrease average bathroom cleaning time from 20 to 17 minutes.	Cycle timeminutes for cleaning bathroom	20.00	13.25	TBD	
MLK- MACC	EVS		Dec-14		2014	Productivity	Decrease the time it takes to replenish an EVS cart at the beginning of the shift	t			TBD	
MLK-OC	Eye	in progress	Sep-14		2014	Cycle time - total	Decrease total cycle time 25% from 120 min to 90 min by Dec 31, 2014	Total cycle time	120	125	TBD	
Humphrey	Financial Services				2013	cycle time reduction	Decrease wait time for patients needing financial appointments	Total wait time in minutes	43	18	yes	Reduced very long line for financial services to no wait time.
MLK- MACC	GI	Decreased discharge cycle time from 20 minutes to 9.7 minutes			2013	Cycle Time - discharge	Decrease discharge cycle time to 10 minutes	Minutes to Discharge	20	9.7	yes	
MLK- MACC	Heme/Onc	Reduced total cycle time from 108 minutes to 79 minutes			2013	Cycle Time - clinic visit	Reduce total cycle time by 30%	Cycle time minutes from check-in to discharge	108	79	yes	
MLK- MACC	Heme/Onc	Decreased no shows from 32% to 13.8%			2014	No show reduction	Decrease no shows by 27%	% patients no showing	32%	13.80%	yes	
MLK- MACC	Neurology	Decreased no show rate from 32.9% to 17%			2013	No show reduction	Decrease no show rate	No show rate	32.90%	17%	yes	
MLK- MACC	OASIS		Oct-14		2014	Reduce No Shows	To reduce no show rate from 42.2% to 30%.	Percent of patients no showing	42.20%		TBD	
MLK- MACC	Optho	not yet launched					n/a				TBD	
MLK- MACC	Ortho	Reduced average no show rate from 38% to 28%			2013	No show reduction	Reduce no show rate.	No show rate	38%	28%	yes	
MLK- MACC	РСМН	in progress	Apr-14		2014	Cycle time - check-in to discharge	Decrease overall cycle time by 10%				TBD	
MLK- MACC	Peds Hub	Decreased cycle time between registration and nurse intake from 14 minutes to 7.5 minutes			2013	Cycle time - registration to intake	Decrease wait time between beginning of registration and RN intake by 50%	Cycle time minutes from registration to RN intake	14	7.5	no with improve ment	
MLK- MACC	Peds Hub	Decreased no show rate from 22% to 18%			2013	No show reduction	Decrease no show rate by 50%	% patients no showing	22%	18%	no with improve ment	
MLK- MACC	Peds Hub	in progress	Dec-13		2014	Cycle time - nursing to provider	Decrease wait time between nurse completing intake and beginning of provider visit by 80%	Cycle time mins from nurse completing intake to provider visit	12	in progress	TBD	
MLK- MACC	Peds PCMH	just launched				<b>,</b>					TBD	
MLK- MACC	Pharmacy	project not completed due to implementation of Q-flow system & transition of of HWLA to Medi-Cal			2013	Productivity	Establish standarized processes for processing HWLA prescriptions based on a score of >75% by all pharmacy staff	Staff survey	5 of 20 staff scored	n/a	no	
Humphrey	Radiology				2013	No show reductions	Reduce no-shows.					Did not continue.
MLK- MACC	Radiology	Increased percent of patients prepared for their appointment from 69% to 81%.			2012	Patient preparation	To reduce the number patients rescheduling appts b/c they were not prepared for the appt by 30%.	% patients arriving prepared for their appointment	69%	81%	yes	
MLK- MACC	Radiology				2012	Staff	To reduce number of staff callouts.					Discussed and raised issues. Never completed as PDSA.
MLK- MACC	Radiology	Decreased mammography cycle time by 30 minutes (75%).			2013		Decrease mammography paper processing time by 75% within one month.	Minutes to do mammo paperwork	:45	:15	yes	
MLK- MACC	Radiology				2013	Cycle Time - Clinic Visit	Reduce wait time from registration to exam					this was having people drink the 2 bottles of water project

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Facility	Dept	Project Result	Start Date	End Date	Year	Category	Goal	Baseline Data Descriptor	Baseline Data	Result Data	Goal Control Achieve Susta	ine Other Results
MLK- MACC	Radiology	Percent of contrast CT scan patients who needed lab tests re-ordered by the radiology RN increased (due to clinic or patients not following directions).	Feb-14		2014	Patient preparation	Increase the number of prepared contrast CT scan patients and reduce the number lab tests that have to be re-ordered by radiology RN 20% in 2 months.	% of contrast CT scan patients who needed labs to be re-ordered by radiology	45%	70%	TBD	
Humphrey	Registration				2013	Cycle Time - Registration	Increase number of patients arriving at clinic to take vitals within 30 $$ minutes of their appointment.	% patients arriving to clinic w/in .5 hr of appt	21%	75%	yes	Decentralizing registration was one test of change.
MLK- MACC	Registration	just launched									TBD	
Harbor	Reg'n/ OB- GYN Clinic				2012	Cycle Time - Clinic Visit	Decrease cycle time.	Total cycle time for patient: Registration to Discharge hr:min	1:54	<1:30	yes	Huge lift to collect the data. Some cycles had been as long as 4 hours. Working on templates to even
MLK- MACC	Rehab	Decreased no shows in occupational therapy from 22% to 14%			2013	No show reduction	Decrease no shows in occupational therapy by 10%	No show rate	22%	14%	no with contribution improve d - y	18%: OT 20%. Found reminders had
MLK- MACC	Rehab	Increased the percent of patients who spend five minutes or less scheduling their follow-up appointment from 58% to 90%			2013	Cycle Time - discharge	Increase the percent of patients who spend five minutes or less scheduling their follow-up appointment from 58% to 85%	% patients who spend 5 min or less scheduling follow-up appointment	58%	90%	yes	
MLK- MACC	Rehab		Aug-14		2014	Standardization - Clinical	Standardize number of visits for a specific diagnosis	number of visits for a couple specific diagnoses - should measure std dev				
MLK- MACC	Surgery				2012	Cycle Time - discharge	To discharge 90% of 3G patients in less than twenty minutes after they are seen by the provider.	% of patients discharged within 20 minutes.	54%	98%	yes	78% are being discharged within 5 minutes!
MLK- MACC	Surgery				2013	Patient preparation	Increase number of patients who know their surgeon's name and what happens in their procedure.	% of patients who know surgeons name & procedure.	10%			Incomplete.
MLK- MACC	Surgery				2013	Productivity	Increase productivity of patients seen to provider hour.	Number of patients being seen per provider hour	1.1			
MLK- MACC	Urgent Care	Number of patients triaged at peak hours remained the same.			2013	Productivity	Increase number of patients triaged between 9 & 11am	Number of patients triaged between 9-11am (peak hours)	21.5	21	no	
MLK- MACC	Urgent Care	Reduced door to doctor time for patients returning to urgent care for follow-up from 3 hours, 47 minutes to 2 hours, 5 minutes			2013	Cycle time - check-in to provider	Reduce door to doctor time for patients returning to urgent care for follow-up by 15%	Cycle time hr:min from check-in to provider for follow-up patients	3:47	2:05	yes	

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