Flowcharting

The information in this document discusses the importance of flowcharting in your organization and provides directions for conducting a successful flowcharting event. After reading the information, please create a flowchart of your access process by following the steps outlined below. A sample access flowchart is attached at the end of this document.

Why Flowcharting

Flowcharting allows organizations to map a process and, more importantly, is process-minded. Flowcharts force an organizational focus on process and processes, to either diagnose bottlenecks and/or errors, or to describe a new and/or existing processes. Specifically, a flowchart should address and answer the following questions:

- Name of process.
- Where does the process begin?
- Where does the process stop?
- Who are key stakeholders?
- Who are process owners?
- What does the process include/not include?

Creating a simple flowchart for access

- Flowchart the steps that a typical client follows from initial contact (phone, walk-in, or referral) to the first clinical treatment session or admission to a bed. At this point, try to avoid any special circumstances that occur infrequently.

- Draw the flowchart from top to bottom and number each box – this makes it easier to talk about the flow and refer to specific steps. To provide guidance, we have included a sample flowchart with 27 numbered boxes on two pages. This is the most we expect – 20 to 30 steps and two to three pages. (Resist getting into more detail.) *Note that the attached flowchart was drawn using textboxes and arrows in Microsoft Word – see tip below.*

- On the attached template, list any data collection forms that are used in your process. Identify where on the flowchart the form is used (refer to corresponding box number) and record what is done with it.

- For an example, please see the flowchart at the end of this document.

Tip: If you choose to use MS Word to create your flowchart, before adding any textboxes, hit "enter" multiple times until the cursor has moved down two or three pages. The pages will remain blank. If you don't do this initially, it is more difficult to add boxes later.

Group Flowcharting

To begin the flowcharting process, the organization should schedule a "flowcharting event" or often referred to as group flowcharting. Table 1 outlines steps for successful group flowcharting. The first step in planning a flowchart event is to define the objectives (e.g. see all clients within 24 hours). This step is best accomplished by meeting with clinical and managerial leaders to discuss objectives, identify participants, etc.; be sure to include opinion leaders.

Table 1 – Steps for Successful Group Flowcharting

Step #1	Define objective (e.g. see all clients within 24 hours)
Step #2	Define process (e.g. admission process)
Step #3	Define first and last steps
Step #4 (Quiet Time #1)	Individually have each person write down process steps on yellow Post-it notes
Step #5	Have everyone place their yellow Post-it notes on wall paper so to create a flowchart (for those who place their Post-its up quickly and become idle, encourage them to read what others are placing on the wall paper until this step of the exercise is complete)
Step #6	Review flowchart
Step #7 (Quiet Time #2)	Individually have each person use red Post-its to identify and record bottlenecks and blue Post-its to describe suggestions for process improvements
Step #8	Place blue and red Post-its on flowchart
Step #9	Review suggested changes
Step #10 (Quiet Time #3)	Ask each participant to pick the three changes that best combine ease of implementation and impact on objective
Step #11	Conduct multi-vote to select changes to initially pilot test
Step #12	Discuss next steps

The event is a group exercise where up to 25 participants, who regularly participate in an identified process, create a flowchart of a process. Typical event resources include: a roll of brown paper or wallpaper; three different colors of Post-its: yellow, red, and blue and a flipchart and markers (for parking lot issues). Using the Post-it notes and paper, as a group they map the process flow using common flowcharting symbols (see the next section), identify potential bottlenecks, and generate solutions to remove causes of waits and delays.

Several guidelines for the event facilitator are:

- Arrange for an appropriate venue (preferably offsite),
- Allow 1 hour for set-up (e.g. arrive 1 hour before scheduled start time, and
- Have lead clinician or administrator kick-off meeting.

Flowcharting Tips

- The job of the facilitator is to ask "why;" ensure that everyone in the group actively participates; develop plan to communicate to those not involved; and allow for time at the end of the event to plan next steps.
- The **Golden Rule** of group flowcharting is to <u>focus on fixing system, not individuals (avoid the blame game).</u>
- To streamline the processes reduce the number "touches" (& steps!) in the process and encourage efficient multi-tasking.
- To remove bottlenecks, encourage efficient multi-tasking as well as parallel processing.

Common Flowcharting Symbols

= process step
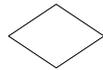
= decision tree (needs two lines leaving it)

= document symbol
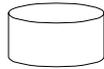
= database symbol

= connector (between two pages)

= terminator

All symbols can be found in Word by going to "view," "drawing," "flowchart symbols" or a common flowchart package like Visio.

Sample Access Flowchart

Detox Program at
ABC Recovery Program
As of 5/20/03

1. Caller places phone call to ABC's general phone #

2. Receptionist receives call

3. Is call for Detox?

No → 4. Transfer call to person requested

Yes

5. Has admitting told receptionist that a detox bed is open?

No → 6. Start a new Detox Waiting List each day, and record name, callback #, insurance

→ 7. AND ask caller to call back in around 2 hours to see if a bed has opened up

Yes

8. Periodically through out the day, deliver Detox Waiting List to admitting office

9. Are there still open beds toward the end of day?

Yes

No → 12. Start new waiting list next day

10. Transfer call to admitting

11. Admitting staff begins calling clients on waiting list

13. Admitting staff conducts brief telephone intake

14. Is client at call back phone #?

Yes

No → 15. Call next client on list.

16

16. Admitting staff looks in card file for any limits to admission (e.g., prior administrative discharges)

↓

17. Does caller qualify for admission to detox?

— No → 18. Admitting staff explains to caller reason caller does not qualify

Yes ↓

19. Schedule clinical assessment ASAP and give rules regarding what to bring and not bring to Detox if admitted

↓

20. Does client arrive on scheduled day?

— No → 21. Cross out name in appointment scheduling book

Yes ↓

22. Admitting aide escorts client to private office

↓

23. Admitting aide conducts search of personal belongings

↓

24. Nurse conducts physical exam

↓

25. *Does nurse's evaluation confirm admission to detox?*

— No → 26. Admitting office refers client to an appropriate level of care

Yes ↓

27. *Nurse escorts client to Detox bed*