Park Nicollet Rethinks the Clinical Experience.

SUBMITTED By Minnesota Medicine, March 2008

Getting to your exam room at Park Nicollet Clinic-Chanhassen is a lot like checking into a hotel. You walk up to a counter in the clinic’s lobby. The receptionist gives you a color-coded card with your room number on it and tells you to go through a set of doors and turn right. There’s no lengthy wait in a lobby. No nurse to escort you down the hall.

Park Nicollet believes the 56,000-square-foot multispecialty clinic, which opened in 2005, may be the only one in the country that allows patients to self-room. “I would say it’s a very radical design,” says Pam Hargis, south region director for Park Nicollet Clinic.

Self-rooming is just one of the innovative features of this clinic, which is organized into color-coded “neighborhoods” with centralized nursing stations. Others include a computerized patient-tracking system and one-stop exam rooms.

Park Nicollet decided to start from scratch when it designed the new facility that replaced a clinic in Eden Prairie. The goal was to eliminate inefficiencies and design a patient-friendly environment. It convened a group of clinicians, administrators, patients, and others, who were charged with using “lean” principles to analyze clinic processes. Several years ago, Park Nicollet embraced Toyota’s lean philosophy, in which teams of employees look for ways to eliminate waste and improve workflow.

For the Chanhassen clinic, the group spent a week considering data collected on such things as the length of time nurses, lab technicians, and physicians spent doing tasks and how many steps clinical staff and patients took. (In one clinic, nurses walked about 2.5 miles a day.) They also tested aspects of the architect’s preliminary design by using string to track a patient’s path through the clinic on the blueprints. The architect was included in the week-long brainstorming session and made design changes on the fly.

Clinicians proposed the self-rooming concept as a way to decrease the amount of time nurses spent walking instead of caring for patients. The group also realized it would eliminate the need for a large waiting room. (The clinic’s lobby does have a small waiting area in case an exam room is unavailable.)

The group also wanted one-stop exam rooms so that patients would be weighed, have their vital signs taken, and give lab samples all in the same place. Research has shown that patients dislike being weighed in public hallways, and that sick patients dislike having to move around.

“If the patient doesn’t feel well, we don’t want to send them all over the place,” Hargis says. To make the concept work, the group had to make the exam rooms easy to find and patients easy to track—so staff would know who is in what room. The solution was a color-coded layout for the clinic and a computerized patient-tracking system.

Welcome to the Neighborhood
The clinic is divided into four neighborhoods, or care areas, that are staffed by at least four nurses and a department assistant.

The hallways between neighborhoods are wide and form a grid, instead of the mazelike pattern found in many clinics. Color-coded signs direct patients to rooms.

At the center of each neighborhood is a rectangular nursing station modeled after nursing stations in hospital intensive care units. From the station, nurses can monitor the neighborhood’s 10 exam rooms. Patients needing something can poke their heads out of the rooms to get the nurses’ attention.

Each neighborhood also has a dictation station with cubbies where physicians can dictate notes. The openness of the stations makes it easy for physicians to communicate with each other and the triage nurse answering phones nearby.
Exam rooms are standardized with the table, sphygmomanometer, patient materials, computer, tongue depressors, and other items in the same place. This gives the clinic the flexibility to move its clinicians and other staff from one neighborhood to another, according to Hargis. In addition, each neighborhood has a lab technician who goes to exam rooms to take samples; the samples are then sent via pneumatic tubes to the laboratory. Patients do need to leave the room for X-rays.

**Computer-Driven**

Clinic manager Connie Vander Top says the clinic couldn’t function without the locator, a computer program that tracks a patient’s progress from the minute he checks in to the minute he leaves. (The program was adapted from software used in hospital emergency departments.) Monitors display what looks like a spreadsheet, listing all the rooms and patients in a neighborhood.

Computers in each exam room are connected to the locator. When a clinician completes part of a visit, he or she notes it in the locator, allowing administrators to know exactly how long each step or procedure during a visit takes.

“You always know where the patient is, and you can always find the physician,” says Joanne Baer, R.N., who works in the clinic.

Family physician Michele Rutledge, M.D., says the locator has many advantages. For instance, she can use it to decide whether she has time to make a phone call before seeing a patient. Or while in the exam room, she might note in the locator that the patient needs a shot, so the nurse can immediately start preparing it. The locator has made doctors and nurses more aware that patients are waiting.

**Catching On**

Vander Top says she was skeptical of the self-rooming idea during the planning of the clinic, but now she’s a fan because it works so smoothly. She has received a lot of positive feedback from patients. “I thought patients would never figure it out, especially the seniors, but I didn’t give them enough credit,” Vander Top says.

So far, clinicians say they frequently hear patients say they like going straight to their exam rooms and not having to wait in a room full of sick people. In fact, the clinic has become so popular that Park Nicollet is planning to turn unused space in the building into more exam rooms. It also has replicated the model in its Maple Grove clinic.

The 56,000 square-foot clinic, located at 300 Lake Street in Chanhassen, was developed by Frauenshuh HealthCare Real Estate Solutions.