



**Health Facility Plan Review Process Improvement Team
Executive Summary for May 8, 2015 Meeting**

On May 8, twenty-seven quality improvement team members began the meeting by examining the database created by the OSDH. The limitations of the following conclusions are: incomplete data, erroneous data resulting in data exclusion, and the database does not currently capture rejections or multiple submissions.

Label	N	Mean	Minimum	Maximum
Difference in days between date of functional program received and approved	81	61	0	400
Difference in days between date of functional program received and stage 1 approved	20	65	1	154
Difference in days between date of stage 1 plan received and approved	38	78	0	371
Difference in days between date of functional program received and stage 2 approved	25	103	1	228
Difference in days between date of stage 2 plan received and approved	51	79	0	345
Difference in days between date of functional program received and final inspection	18	168	0	1179

In a previous meeting, the quality improvement team identified the functional program review step as the most problematic step in the overall facility plan review process. In the May 8 meeting, the team isolated the top four areas of waste within the functional program review process as: too many points of entry (within OSDH), unclear expectations of outcomes, inadequate submissions (looking for clearer standard for different design types), and timing of review requirements (the process asks for information in the functional program that will be answered in Stage 1 or Stage 2).

The group then brainstormed possible solutions for the four top areas of waste. These potential solutions will be evaluated against objective criteria and prioritized. Resulting solutions will be implemented (some possibly in pilot form) and studied to determine effectiveness. This process will begin at the next meeting on June 12, 2015.