Quality improvement for General Practice

A guide for GPs and the whole practice team

RCGP Royal College of General Practitioners

The Royal College of General Practitioners (RCGP) has published Quality improvement for General Practice: A guide for GPs and the whole practice team. Designed with the busy primary care professional in mind, the guide details a range of straightforward quality improvement (QI) techniques that will see you and your team through a cycle of improvement time after time.

This paper offers practical guidance on using process mapping, one of a range of helpful tools described in the RCGP QI Guide.

PROCESS MAPPING

Figure 1: Photo of process map

What is process mapping?

Process mapping creates a visual representation of all the steps in a process. It is best created by a group of people involved in the process. This can include patients or individuals from organisations that your practice works with. It can be used for any practice process that consists of multiple steps, e.g.:

- the repeat prescribing system
- dealing with results
- processing incoming and outgoing mail
- making a referral
- registering as a new patient
- registering as a patient for online services.

Why use process mapping?

The objective is to design a more efficient process, plan changes and free up time for other activities. The benefit of using process mapping for the practice team is that it can help everyone to:

- Understand each stage in the process, including those with which they are not directly involved.
- Quickly identify bottlenecks and steps that appear to be a waste of time.
- Engage in change, contribute to improvements and take ownership of the new or revised process, which will help with buy-in.

The steps in creating a process map

Before the session:

1. Decide which process is to be mapped and arrange a date to meet that all can make.
2. Choose a facilitator. This person needs to be able to explain the exercise to the rest of the team. They do not need to have a detailed understanding of the process that is to be mapped.
3. Collect the materials. You will need post-it pads of different colours and pens.

The map can be constructed on a wall, on paper or on a table-top. A lot of horizontal space is required.

4. The facilitator explains process mapping to the participants, making it clear that each step needs to be broken down. The more detailed the better because this will identify waste.

Figure 2: Process map: sequential steps in a process

| Receptionist prints script | Receptionist takes script to folder in front office | Doctor picks up folder and takes to room | Doctor signs script |

5. Define the start and end point of the process. For repeat prescribing, the start point could be the patient requesting a repeat prescription; the end point could be the patient collecting the prescription (fig. 2).
6. If one step can be done in several ways, this is added vertically. e.g. in the repeat prescribing process the patient may request a script in different ways (fig. 3).

Figure 3: Process map: how to display options in the process

| Patient requests at desk |
| Patient requests by post |
| Pharmacy requests for patient |
| Patient requests online |

7. Once the map is created, the facilitator asks the group where the problems arise. The participants then attach these to the map using a different coloured post-it note.
8. Participants are then asked to identify solutions. These are attached to the map using another different coloured post-it note. They are stuck over the problems that were identified.
9. This process will then have identified areas for improvement and generated new ideas to try out. The group should decide if they will try out the changes either one at a time or several together, and agree which measurements they will use to identify whether or not there is an improvement over time. The section on run charts offers you a method of measuring and tracking change that will help you to identify process improvement and show you which actions should be sustained.
10. A further process map is then created by the group to illustrate the agreed new process.

Depending on the complexity of the process to be mapped, the exercise can take as little as 20 minutes or up to 2 hours.

After the session: the outcome

By the end you will have created a visual display of an improvement to an existing process. On occasions there may be so many problems with the process that you need to start from scratch. At these times, creating a driver diagram could be a useful starting point.

It might be a good idea to leave the map on display for a few weeks so that any issues that arise during implementation can be more easily discussed.