MedStar Health Performance Improvement & Analytics Case Study

Kidney Transplant Referral Process

Project team: Lubaba Hasan and Jastine Paran

Overview

Project leads, Lubaba Hasan and Jastine Paran were trained to facilitate improvement projects using the SMART Improvement Methodology. As part of the training, they were asked to complete an improvement project with mentoring from a member of the Corporate Performance Improvement team, Patrick Gaume. As part of the training, the MedStar Georgetown Transplant Institute launched a SMART improvement project to reduce the backlog of pending kidney transplant referrals and create a sustainable referral process. The work focused on improving how referrals are prioritized, scheduled, documented, and monitored so patients can move more reliably to the next step in the transplant evaluation process.

The Challenge

The referral process had accumulated a large backlog of pending kidney referrals. Baseline analysis found 597 pending referrals, and 83% of those pending referrals were more than four weeks old.

- Setting: MedStar Georgetown Transplant Institute kidney transplant referral process.
- Workflow affected: referral intake, clinical screening, OTTR processing, and scheduling.
- Key issues: the team needed to tackle the backlog, keep pending referrals under 140, and schedule patients within four weeks of receiving their referral.
- Risks identified: limited process oversight due to a vacant Referral Program Coordinator position and resistance to change.

The Approach

The project team used the SMART improvement framework. The team used the methodology and tools to understand the current state of the kidney referral process Scope and Measure phases), analyzed root causes (Analyze phase), prioritized and implemented solutions, developed standard work (Rethink phase), and implemented ongoing management practices (Track phase).

- Process mapping: created a value stream map and detailed process maps across four referral phases: Intake, Clinical Screening, OTTR Process, and Scheduler Process.
- Data and analytics: used dashboard development, project metrics, Tableau reporting, OTTR data, and PUBS data to guide decisions and support the control plan.
- Root cause analysis: identified issues including lack of staff and process oversight, inconsistent use of the OTTR pending referral list, failure to prioritize older referrals, inconsistent documentation of contact attempts, unassigned referral actions, variability in scheduling practices, referrals not being ended, and scheduling errors.

- Prioritized solutions: standardized use of the OTTR pending referral list, sorted referrals from oldest to newest, built the IDX schedule in advance, hired or assigned scheduling program coordination, documented scheduling attempts, ended referrals after three unanswered attempts, created standard operating procedures, retrained PSCs, and used audits to address process or personnel issues.
- Sustainability tools: developed standard work instructions and SOPs for the three primary personnel groups involved in the process, completed sustainability assessments, created a control plan, updated the Tableau dashboard, and implemented a Daily Management System with Wednesday and Friday huddles.

The Results

The project team reported that the process consistently met the project goals and that improvements were seen in all areas of the process since September 2024. The team also identified that maintaining progress depends on holding PSCs accountable to the process and keeping process ownership active.

- Key Outcome: median time from referral to scheduled evaluation was reduced from >28 days to a mean of 8 days. The number of backlog referrals decreased from 597 to 138, meeting the goal of <140.
- Key Outcome: standard work instructions were used as an auditing tool.
- Key Outcome: the Tableau dashboard was refined over time to better meet the needs of PI Facilitators and the Process Owner.
- Key Outcome: the control plan aligned with OTTR and PUBS data in Tableau.
- Key Outcome: the project team reported improvements across all areas of the process since September 2024.

Why It Matters

Kidney transplant referral timeliness affects a patient's ability to move to the next step in the transplant process and is a determinant of customer satisfaction. By reducing referral backlog, standardizing work, strengthening oversight, and improving data visibility, the project supports a more reliable experience for patients and a more manageable workflow for the teams responsible for referral processing and scheduling.

Key Takeaways

- Clear expectations, process oversight, and consistent follow-up are critical to sustaining referral process improvement.
- OTTR creates an advantage for documenting and measuring the transplant timeline, but documentation requirements should be simplified where possible.
- Sustainable improvement requires a workflow designed around the patient, informed by available data, and supported by the right people in the right roles.
- Ongoing auditing, dashboard tracking, and routine huddles help maintain accountability after project closeout.

Team

This project was led by Lubaba Hasan and Jastine Paran with involvement from operational and clinical roles across the kidney transplant referral process.

- Referral Program Coordinator
- Referral Patient Service Coordinators
- MWHC Clinic Manager
- Kidney Nurse Manager
- Transplant Project Manager
- Process Owner

Learn More

For more information about this project, contact the project leads, Lubaba Hasan and Jastine Paran, or the MedStar Health Performance Improvement & Analytics team.