Health Facility Plan Review Process Improvement Team
Executive Summary
November 13, 2015

The Health Facility Plan Review Process Improvement Team held their ninth meeting on November 13, 2015. Present were Lee Martin, Kristi Hancock, Don Maisch, Ryan Bader, Darlene Simmons, Henry Hartsell, Dwayne Robinett, Brian Guenther, Jon Mercer, Jodi Simmons, LaWanna Halstead, Roger Knak, David Wright, John Larson, Todd Schuster, Karen Rieger, Russell Ramzel, Debbie Raison, David Foss, Ginger Thompson, Debbie Raison and Crystal Rushing.

The Team from February to November 2015 achieved the following:

- Modified the functional program and construction plan review process administered by the Oklahoma State Department of Health (OSDH) to reduce steps and time by allowing:
  - Concurrent submittal of the functional program with Stage 1 plans; and
  - OSDH review-and-comment on the functional program and Stage 1 plans, as an alternative to disapproval;
- Developed standard process-monitoring data reports with focus on processing speeds, approval rates, and aging of submittals for functional programs and Stage 1 and 2 plans, to be reviewed periodically by OSDH and the Team;
- Developed, tested successfully, and implemented voluntary templates for functional program submittals, to provide guidance to facilities in order to avoid errors and omissions that result in incomplete or disapproved functional programs (Link!);
- Created frequently-asked-questions and answers to address problems identified by the Team and to reduce waste in the process (Link!);
- Mapped the roles and processes for hospital and ambulatory surgical center (Link!) and nursing facility (Link!) plan reviews and posted the process maps on the OSDH website;
- Established a page on the OSDH website dedicated to plan review process improvements, with executive summaries of the Team's meetings, links to the functional program templates, and answers to frequently-asked-questions (Link!);
- Outlined a process for formally adopting and publishing interpretations and rulings to reconcile Oklahoma state rules with Centers for Medicare & Medicaid Services regulations and with national codes and guidelines;
- Created a customer service survey available on the OSDH website to measure satisfaction with the plan review process and to identify opportunities for continuous improvement (Link!);
- Endorsed a proposal to develop and implement an online portal to allow customers to submit documents and get project status reports;
- In general, identified process and communication improvements that could be implemented through changes in OSDH administrative and management practices, without the need for changes in laws or rules.
Highlights of the November 13, 2015 meeting included reaching consensus agreement to:

- Set an objective of 100% compliance with a maximum 45-day review time for all functional program and plan submittals, by June 30, 2016;
- Implement a prioritization protocol for Stage 1 plan reviews that balances the maximum 45-day review time against the needs of time-sensitive facility projects, such as immediate-jeopardy modifications and disaster-recovery projects;
- Pursue a collaborative effort with the Health Law Section of the Oklahoma Bar Association, the Oklahoma City University School of Law, and OSDH to engage law students to perform quality improvement work on the plan review process, to include development and refinement of templates and other informational materials;
- Continue OSDH efforts to hire a third architect and provide staffing updates at the next meeting;
- Update the frequently-asked-questions page to include the new email address for communications on functional programs and design and construction documents, PlanReview@health.ok.gov;
- Revise the cover letter and frequently-asked-questions to reflect that a facility, following a review-and-comment action by OSDH on a functional program and Stage 1 plan submittal, may submit required revisions with the Stage 2 submittal, instead of submitting for another Stage 1 review;
- Add a data category to identify and track incomplete submittals;
- Create and publish additional templates for submittal under OAC 310:615, which covers ambulatory surgical centers;
- Implement the communication plan for transmitting results and periodic progress of the Team's efforts to interested parties and stakeholders;
- Collect data to assess the success of concurrent submittals of functional programs and Stage 1 plans; and
- Wrap up monthly meetings of the Team and move to quarterly monitoring and process-improvement meetings beginning in March 2016.

The next meeting will be set for March 2016.