Handy guide to process mapping
December 2017
The Mental Health Access Improvement Support Team (MHAIST) supports NHS boards to improve the quality and accessibility of Psychological Therapy (PT) and Child and Adolescent Mental Health Services (CAMHS).

MHAIST has developed resources that can be used to identify enablers and barriers in your services, which in turn can help identify improvement opportunities.

We have developed the following handy guides:

1. Handy guide to calculating new to follow-up ratios
2. Handy guide to Measurement for Improvement
3. Handy guide to mental health waste spotters
4. Handy guide to process mapping
5. Handy guide to the Model for Improvement

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Contents

What is process mapping? 4
Process Mapping Event 5
Follow-up meeting recommended activities 6
What is process mapping?

Health and social care systems and processes are often complex and fragmented. It is unlikely that a single member of staff would fully understand a complete service user pathway or process. Process mapping is a powerful tool to understand how service users and information flows through the health and social care system, and to demonstrate how various parts of the system link together. It is a great way of highlighting visually what happens and enables you to identify unnecessary steps and duplication.

The aim of process mapping is to map each step of the current process to help identify opportunities for improvement. Furthermore, process mapping helps all members of the team to identify issues with the current process and generate ideas for testing improvements. It is vital that the service users’ and carers’ perspectives are included in the process mapping exercise, otherwise you will just end up mapping what people think happens rather than what actually happens. Ideally, you want to map a couple of individuals’ actual experiences of using the service and ask them for their opinions about what did and didn’t add value.

The outcome is a map of the service user or information’s journey as a visual representation — a picture or model — of the relevant procedures and administrative processes. The map shows how things are and what happens, rather than what should happen. This helps anyone involved see other people’s views and roles. It can also help you to diagnose problems and identify areas for improvement.

There are different approaches to mapping service user journeys, procedures and administrative processes in health and social care services. Which one you select will depend on:

- what you need to know
- resources and timescales, and
- engagement and interest of staff.

Each one gives you a slightly different perspective and there is no definitive right or wrong. The key is to reflect how things are and not how they should be.
Process Mapping Event

This section provides guidance for holding a process mapping event.

Prior to the Process Mapping Event:

- Define start and end point of process to be mapped.
- Invite all members of the multidisciplinary team involved in that process to a mapping event, including service user and carer representatives.
- Do not be too concerned if you can’t get all members of the multidisciplinary team to attend. After the event you can take the map to them.
- Send out some preparatory information on process mapping for participants to read before the event.

The following resources may be required at the Process Mapping Event:

- brown paper or flipcharts or wallpaper/lining paper
- Post–it® notes (possibly coloured for different types of issues)
- marker pens
- tape or Blu-tac® or self-adhesive spray, and
- scissors.

At the event

Start by outlining the process to be mapped and then encourage participants to start writing their part of the process on Post–it® notes. Please note the following.

- Process mapping events often require strong facilitation to keep people on track with the task and prevent distractions caused by discussing the issues in detail.
- Encourage people to write issues and ideas for improvements on separate Post–it® notes and park them on a flipchart.
- Reinforce the importance of mapping the process as it usually happens, not the ideal or how it should happen, but what happens for the majority of service users.
- Arrange the Post–it® notes to ensure they capture the service user journey in the correct sequence.
- Where relevant capture, for example, times, delays, waits, hand-offs.
- Thank all participants for their involvement, and reinforce the need for a follow-up meeting to agree the map and actions to be progressed.
Following on from the process mapping exercise, ensure you walk the service user journey and continue to involve service users to gain an understanding of their experience and to capture their ideas for improvement. Show the process map to the relevant individuals from the multidisciplinary team who were unable to attend the event and encourage comments on current state as well as ideas for improvement.

Also, display the process map in the relevant clinical area and encourage all staff to amend or update, and put forward ideas for improvement. And finally, type up the process map, issues and ideas, and send out to all participants with a date for a follow-up meeting quite soon afterwards, to maintain momentum.

Follow-up meeting recommended activities

It is often too time consuming to analyse the process map in the first meeting. It is recommended that this is undertaken at a follow-up meeting which will allow relevant information to be captured from other members of staff, service users and carers as well as vital information from walking a service user journey.

At the follow-up meeting it is advisable to start by analysing the process map. Consider the following:

- How many times is the service user passed from one person to another (hand off)?
- Where are delays, queues built into the process?
- Where are the bottlenecks?
- What are the longest delays?
- What is the approximate time taken for each step (task time)?
- What is the approximate time between each step (wait time)?
- What is the approximate time between the first and last step?
- How many steps are there for the service user?
- How many steps add no value for the service user?
- Are there things that are done more than once?
- Are there any rework loops?
- Is work being batched?
- Where are the problems for the service user?
● At each step, is the action being undertaken by the most appropriate staff member?
● Where are the problems for staff?
● Where is the greatest amount of time currently lost or wasted?
● Can any processes be carried out simultaneously?
● What do service users complain about?
● If your team changes its processes, are there any other teams that might be affected?

You don't need to map everything – concentrate on the area where there is a gap in your understanding, or the area that needs improvement. Ideally, you will know where the bottleneck is before you go into more detailed mapping, as the information you need should be slightly different.

Wherever possible, use photographs and pictures of places, staff and equipment in mapping exercises. This brings your representation of 'how things are' to life. Also, try and look beyond the pathway when mapping, as it's often the same staff or resources that look after the service user before and after the first step of treatment.
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