Improving Patient Access & Clinic Efficiency

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WHY SHOULD WE IMPROVE PATIENT ACCESS?

As with all FHTs, SETFHT wants to offer our patients same day/next day appointments for urgent matters. We have appointment times available each day but our patients reported they had difficulty getting through to make an appointment. While the average length of waiting times at the peak times was less than 4 minutes, this feels like an eternity when you just want to get through to your primary care provider. While our patients have had the option to make/cancel appointments using an online portal from our website, many still prefer to call the clinic. We have two clinic sites and the phone systems are separate, as one phone system is linked with Toronto East General Hospital and the other is not. As a result, patients had to call one of two clinics to make/cancel appointments. We had been challenged to respond to these calls in a timely manner. We had also been challenged in managing patient expectations and disappointment with our system.

WHAT WE EXPLORED

- Will centralization of phone centre to one site work?
- Do we have enough staff on phone lines?
- What are the wait times?
- How can we decrease the number of incoming calls, assess call types?
- What times of day require more attention?
- What other methods communication can we come up with?

MEASURES

Outcome Measure:
40% reduction in average time waiting for calls to be answered during peak periods.

Process Measure:
100% of admin staff will be trained for customer service and efficiency of phone discussions.

Balancing Measure:
Staff satisfaction with changes to work flow.

WHAT WE DID

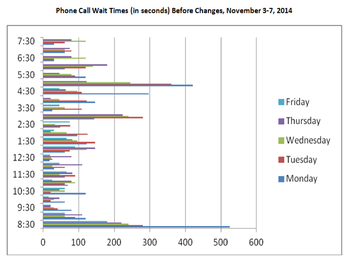
We began a pilot in November 2014 that included several changes to the way we had responded to patient calls:

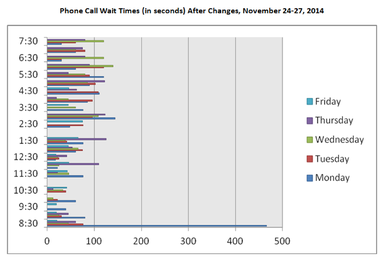
- We consolidated phone staff to one site and asked patients to call just one central number.
- We re-organized existing staff to ensure adequate phone coverage.
- We rotated staff through phone and other admin positions to prevent burn-out and increase job satisfaction.
- We encouraged patients to use the online system to make appointments and ensured staff frequently reviewed those emails.
- We gave staff additional training to encourage more efficiency in their phone discussions and to improve customer service.

OUTCOME

Data from Nov 3-7, 2014 showed that the most significant wait times were Mondays at 8:30 am and 4:30 and 5:00 pm, and Tuesdays at 8:30 am, 3:00 and 5:00 pm. After the above change ideas were put into place, there was a significant reduction in wait times:

- Monday 8:00 am: 8% decrease
- Monday 4:00 pm: 63% decrease
- Monday 5:00 pm: 74% decrease
- Tuesday 8:30 am: 71% decrease
- Tuesday 3:00 pm: 64% decrease
- Tuesday 5:00 pm: 72% decrease





LESSONS LEARNED

We did not need to hire additional staff; when tasks were redistributed, there was adequate coverage for the phones. However, shortly after the pilot, we experienced a staffing shortage due to some leaves of undetermined length and we were unable to hire replacement staff until we knew how long the leaves would last. This, in addition to summer vacations, resulted in wait times lengthening.

Introducing a single phone number to call for appointments should be easier for patients, but patients who generally attend our second clinic site have been slow to adopt the new number. We need to consider other communication strategies so that callers do not continue to call the previous number, as this results in non-phone staff having to manage those calls. In addition, when patients calling the correct number get frustrated and hit "0", it does not take them to a SETFHT operator, but to the hospital's operator.

Patients wanted other forms of technology to communicate with us. Setting up two-way secure patient messaging via our website has increased by 200% since starting making these changes. We also email appointment reminders that has decreased incoming phone calls but no data is available to assess this.

It was easier to manage and train staff when we moved to one central phone centre.

WHAT OUR TEAM HAS TO SAY

Positives:

- Support staff members felt the changes were beneficial to patients, who reported having better experiences in getting through to the clinic.
- Some commented that everyone is working and doing their jobs, that in the past it felt as if the phones were not being answered as frequently as they should have been.
- Staff at the site that no longer answers phones reported that their work is much less stressful and the day is much more manageable as they can now focus on patients at the clinic.
- Staff reported that it has been positive working with other staff members they had not previously worked with, and that everyone has been comfortable asking questions.

Challenges:

- It can be difficult to check messages when there is only one person at the front desk and two voice mails to check.