

PAASSPORT: Primary care Advanced Access Study – Spreading the Practice and Optimizing interprofessional Resources and Treatment

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OBJECTIVE:

This project aims to introduce, implement and evaluate advanced access scheduling practice to medical and chiropractic health services provided in the context of an urban academic family medicine team [as measured by time to third next available appointment (TNA)] in Toronto, Canada.

BACKGROUND:

Advanced access refers to an innovative appointment scheduling approach that aims to provide patient access to their provider of choice when they wish. Through improved access to one's interprofessional (IP) health team, continuity of care has been shown to increase with a subsequent decrease in repeat demand for the provider as well as reduced use of emergency rooms to access care. By expanding the advanced access concept with other providers on the health team through IP collaboration we expect to observe an increase in healthcare access and improvement in patient clinical outcomes and satisfaction.

METHODS:

This mixed-methods project involves the implementation of open access to healthcare providers, both physicians and chiropractors, at the St. Michael's Hospital Department of Family and Community Medicine. This involves the quantitative measurement of practice metrics of 3rd next available appointment (TNA) and appointment supply and demand. TNA has been shown to be a valid and reliable indicator of patient access. In addition, patient satisfaction surveys were developed and administered to patients in waiting rooms for both chiropractic and family physician practices. Focus groups with providers and staff were also conducted.

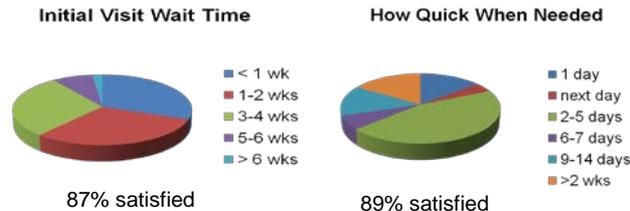
RESULTS:

Preliminary results have indicated that advanced access scheduling has reduced the wait times for patients requiring rapid access to their provider and that it has shortened the time period for the TNA. Initial results, as demonstrated on the table below, have also indicated an improvement in patient satisfaction with this model of delivery for both physician and chiropractic practices. Thematic evaluation of focus group results has indicated that providers were supportive and also satisfied with the mechanism utilized for enabling improved access in this study.

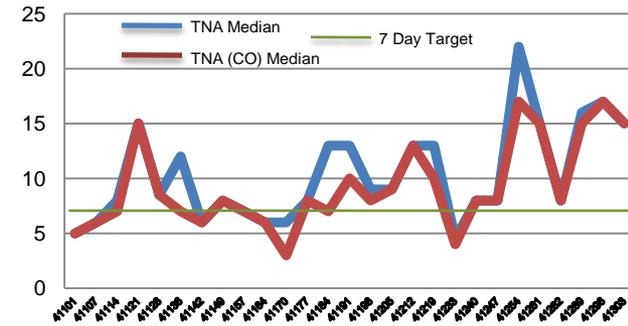
% SATISFACTION WITH TIME WAITED FOR MD APPT

	2011 N = 720	2012 N= 706	2011	2012
Appropriate length of time to make appt			72.0	82.6
Satisfied with length of time to make appt			57.5	64.0
How quickly did you get an appt when sick?				
Same day:			24.2	26.0
Same day or next day:			36.0	39.1
When did you make this appt? Today :			15.5	19.3
< 3 days			29.4	35.6
> 6 days			40.4	45.5

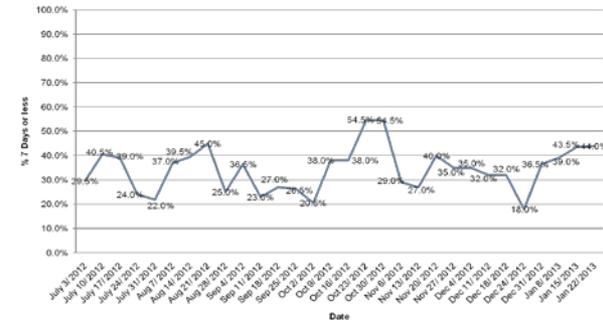
DC PATIENT SATISFACTION RESULTS (N=52) – 1 Week Snapshot



CHIRO TNA WEEKLY DATA



% Physicians with 7 Days or less



CONCLUSIONS:

Through the use of an open access model of appointment booking in interprofessional care, we envision significant benefits including: improved and timely access to health services, increased comprehensive healthcare and decreased healthcare resource use such as emergency and walk-in clinic care.

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