

HEALTH CARE HOME:

Phone assessment and treatment



HEALTH CARE HOME
COLLABORATIVE



URGENT AND UNPLANNED CARE

WHEN I'M UNWELL



Access to care during
business hours



Telephone assessment and
treatment (clinical triage)



Same day access
and appointment
systems



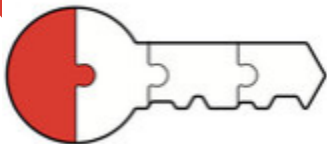
Patient wait times

MANAGING ACUTE DEMAND



The challenge:

One of the biggest challenges of general practices in New Zealand, is managing the number of calls from patients who request same-day appointments (acute demand).



WHAT IT ALL LOOKS LIKE

Click on image to play video



HEALTH CARE HOME
COLLABORATIVE



HEALTH
HAWKE'S BAY
Te Oranga Hawke's Bay

PRINCIPLES



- When a patient calls a practice they get through the first time



- Patients get help over the phone from their doctor so they don't always need to come into the practice



- Patients get booked into an appointment on the day if they need one



- Patients receive the right care at the right place and at the right time



BENEFITS OF CLINICAL TRIAGE



- We value the patients time

- We provide other options for access to care



- We will improve business efficiency



- We will increase the capacity to cope with acute demand

- We will free up time for proactive and planned care



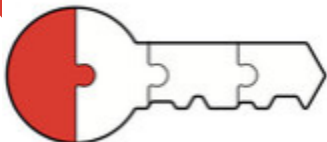
- We are enabling patient choice



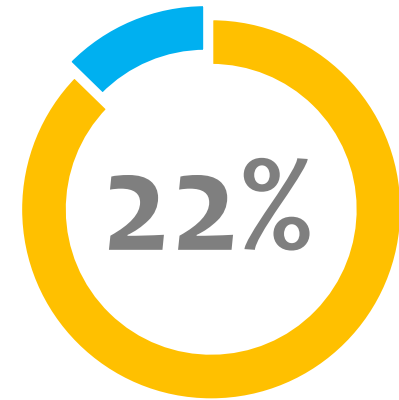
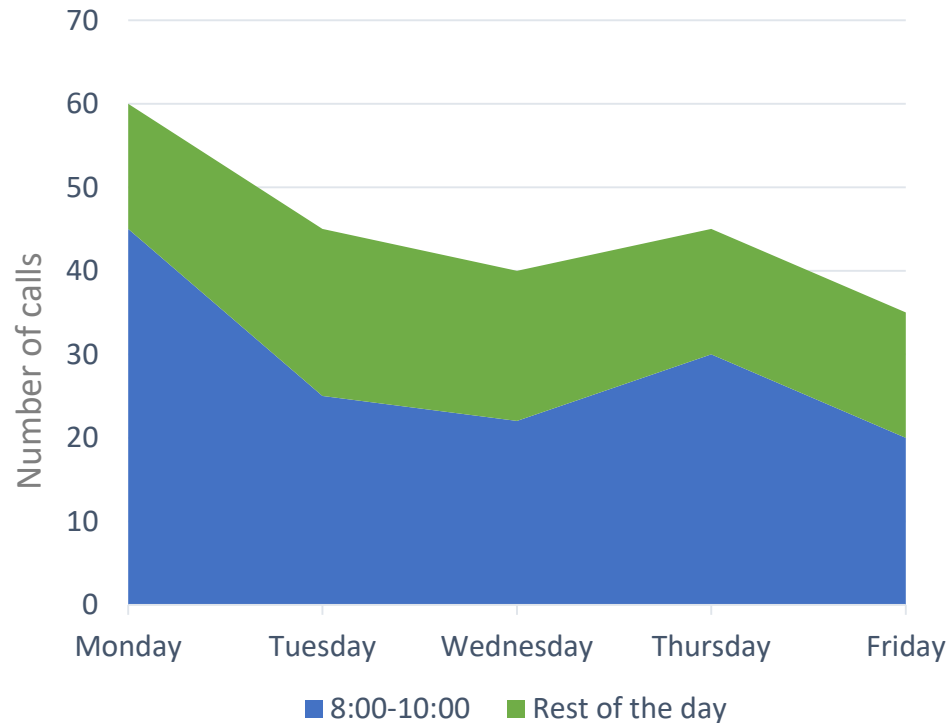
OUTCOMES FOR TRIAGE

Our goals are to:

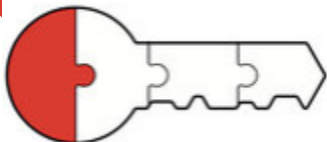
- Provide alternative Face to Face consults
- Free up doctor time for patients that NEED to see a doctor
- Ensure patients are seeing the right person
- Manage workflow more efficiently
- Avoid unnecessary visits to the practice
- Increase patient satisfaction
- Increase capacity for routine, preventative and proactive care for those with complex needs



DETERMINING THE DEMAND



22% of all patient calls are between 08:00 – 10:00 on a Monday



WHO CAN TRIAGE?

Who do you see in your practice triaging phone calls?



**General
Practitioners**



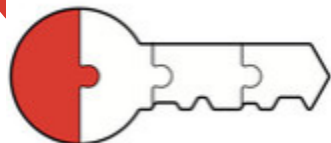
**Nurse
Practitioners**



**Clinical
Pharmacists**

E.g. 5 calls for same day appointments between 8-9 am per GP = 15min triage time at 9-9.15am @ 3min per call

E.g. 15 calls between 8-9am across 3 GPs- 1x3, 1x4,1x8 = 15min triage time at 9-9.15am @3mins per call = GP does own pts first then picks remaining GPs extra 3



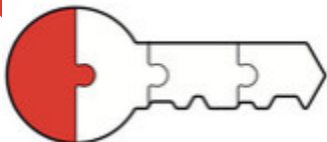
WHEN? HOW OFTEN?

All GPs and NPs, some GPs and NPs, own patients, all patients?

- E.g. 5 calls for same day appointments between 8-9 am per GP = 15min triage time at 9-9.15am @ 3min per call
- E.g. 15 calls between 8-9am across 3 GPs- 1x3, 1x4, 1x8 = 15min triage time at 9-9.15am @3mins per call = GP does own pts first then picks remaining GPs extra 3

More sessions at high call load times- Monday, Tuesday?

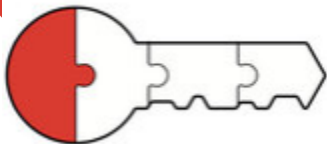
- Second triage session midday? Extra triage session 3pm?



HOW WILL IT AFFECT STAFFING?



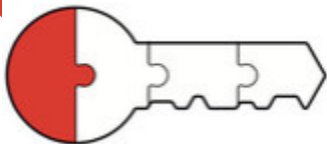
- If your GP's currently start consulting at 08:30 or 09:00am, you may need to adjust their hours to cover the peak morning call period.
- As GP triage is quicker and more efficient than face-to-face appointments and frees up appointment time for patients who need it, you may find that your practice can see the same number of patients with reduced FTE GP's.



IMPLEMENTATION

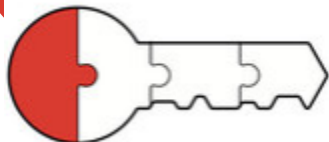


- Gp Triage Skill Set, determining who already has the skills and how to train GP'S (scripting)
- Reception training and scripting
- What are the nurses and other teams role in GP triage
- Determining options for patients e.g. see GP, NP or RN, Pharmacy, Lab test, Rx or can they be dealt with over the phone at a booked phone consult
- Documenting and charging decisions



CLINICAL TRIAGE ROLES

STAFF	ROLE
Receptionists	<ul style="list-style-type: none">• Answer calls according to triage script and enter patients into doctor triage template as appropriate• Process paperwork associated with costs• Data collection
General practitioners	<ul style="list-style-type: none">• Contact patients• Book same-day appointments as appropriate• Generate paperwork associated with costs• Data collection (triage codes)
Management	<ul style="list-style-type: none">• Allocate physical space for GP triage room• Adjust GP hours to cover peak morning period (08:00 – 09:00am)• Arrange increased telephone system capacity• Organise training in booking appointments for GP's
Practice Nurses	<ul style="list-style-type: none">• Follow up any patients to GP is unable to contact



PATIENT COMMUNICATION



Hello, can I see a doctor?

That sounds good!

It is 020 XXX XXXX

I feel...

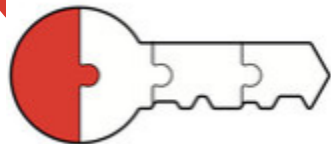
We are offering a new service where the doctor can help you over the phone. You may not need to come in

The Doctor/ Nurse PT will give you a call in the next hour and see what the best plan is

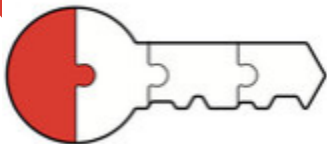
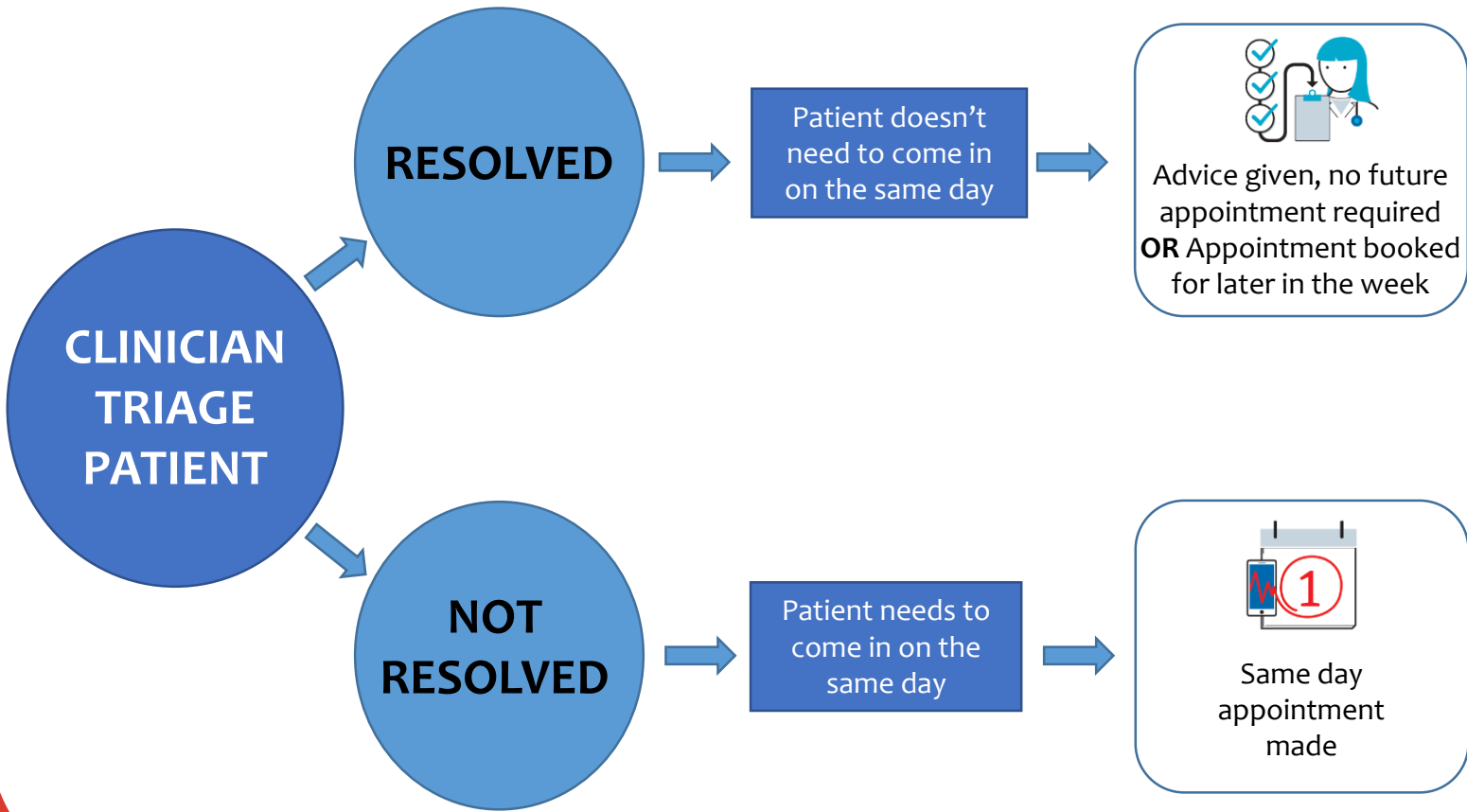
Great, what is the best contact number?

Thank you the doctor will call you soon

Hello Alex, how are you feeling today?



CALL OUTCOMES

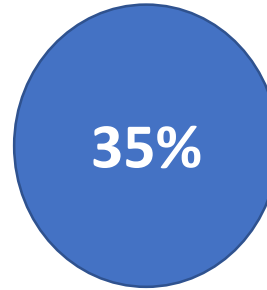


AVERAGE TRIAGE OUTCOMES

Same day appointments



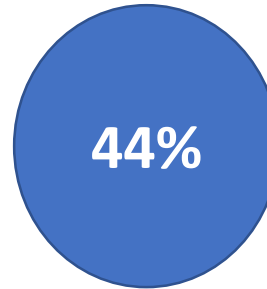
A practice of 10,000 patients may expect 30-40 calls per day



Managed with clinical advice only or with script (50min patient time saved per call)



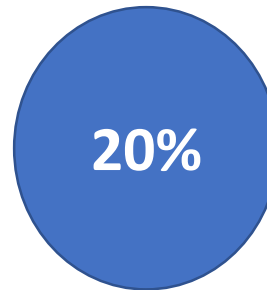
On average it usually takes 3 minutes per assessment call



Given same day appointment



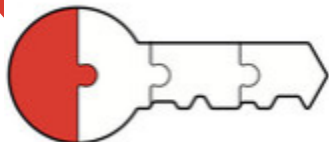
There is no correct resolution rate (percentage of triages resolved over the phone)



Speak to GP within 30 minutes of ringing for appointment



Resolution rate depends on clinical and patient safety, own GP who knows them etc.

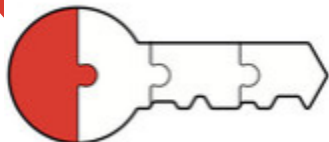


SCHEDULING

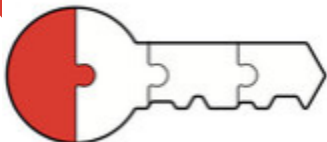
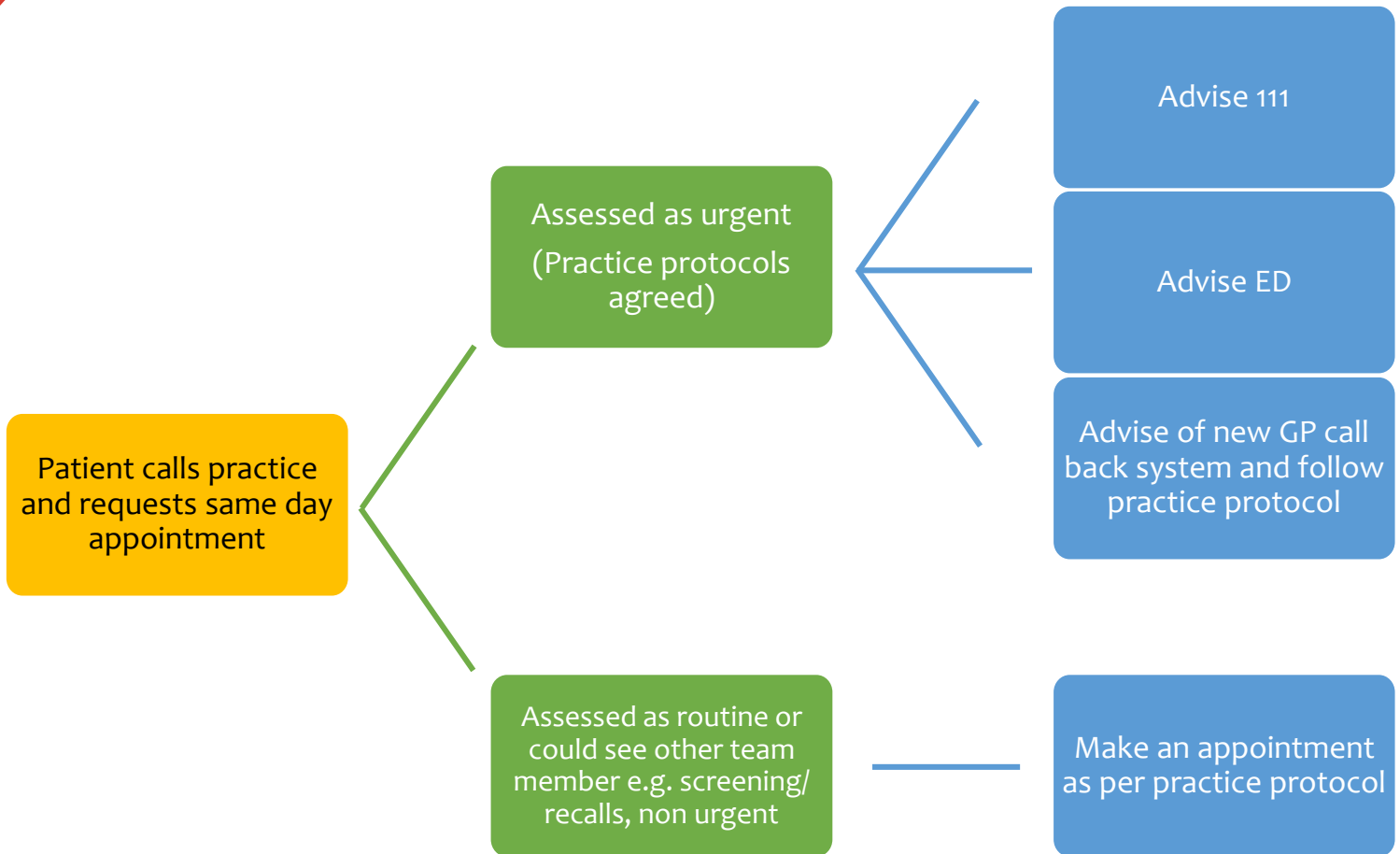
Appointment Book 1

Date: Fri 31 Aug 2018 Proj: Dr Hayley Scott (HS)

Time	Patient	Procedure	Note	Stat	SMS	Location Type
08:45 am	Huddle					
09:00 am	F2F					
09:15 am	F2F					
09:30 am	F2F					
09:45 am	Phone Triage					
10:00 am	Paperwork					
10:30 am	F2F					
10:45 am	F2F					
11:00 am	DOC URGENT APPNT			■		At Practice (AP)
11:15 am	F2F					
11:30 am	DOC URGENT APPNT			■		At Practice (AP)
11:45 am	F2F					
12:00 pm	DOC URGENT APPNT			■		At Practice (AP)
12:15 pm	F2F					
12:30 pm	LUNCH					
02:00 pm	Phone Consult					
02:15 pm	F2F					
02:30 pm	DOC URGENT APPNT			■		At Practice (AP)
02:45 pm	F2F					
03:00 pm	DOC URGENT APPNT			■		At Practice (AP)
03:15 pm	F2F					
03:30 pm	DOC URGENT APPNT			■		At Practice (AP)

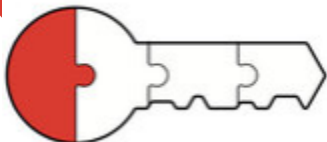


WORKFLOW



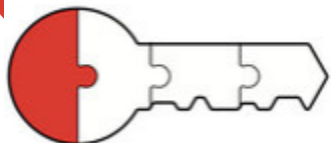
RECEPTIONIST SCRIPT

See Call Handler Script sheet



GP SCRIPT AND PROCESS

See GP Script sheet



ADVANCED FORMS

New Clinical Triage (Procon Limited)

Main | Clinical Triage | More | Audit

Clinical Triage 0:13

Initial Contact | **Outcome**

Has the issue been resolved by Clinical Triage?
 Yes No

Management Plan/Safety Net

- If condition gets worse, contact the practice
- If condition gets worse, call 111 and ask for an ambulance
- If condition gets worse, go to A&M
- If condition gets worse, go to ED

Final Notes/Additional Safety/Management Plan (optional):

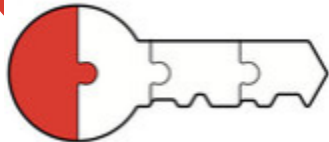
Do you have any further questions?

Add Invoice

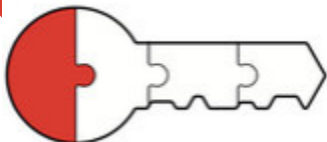
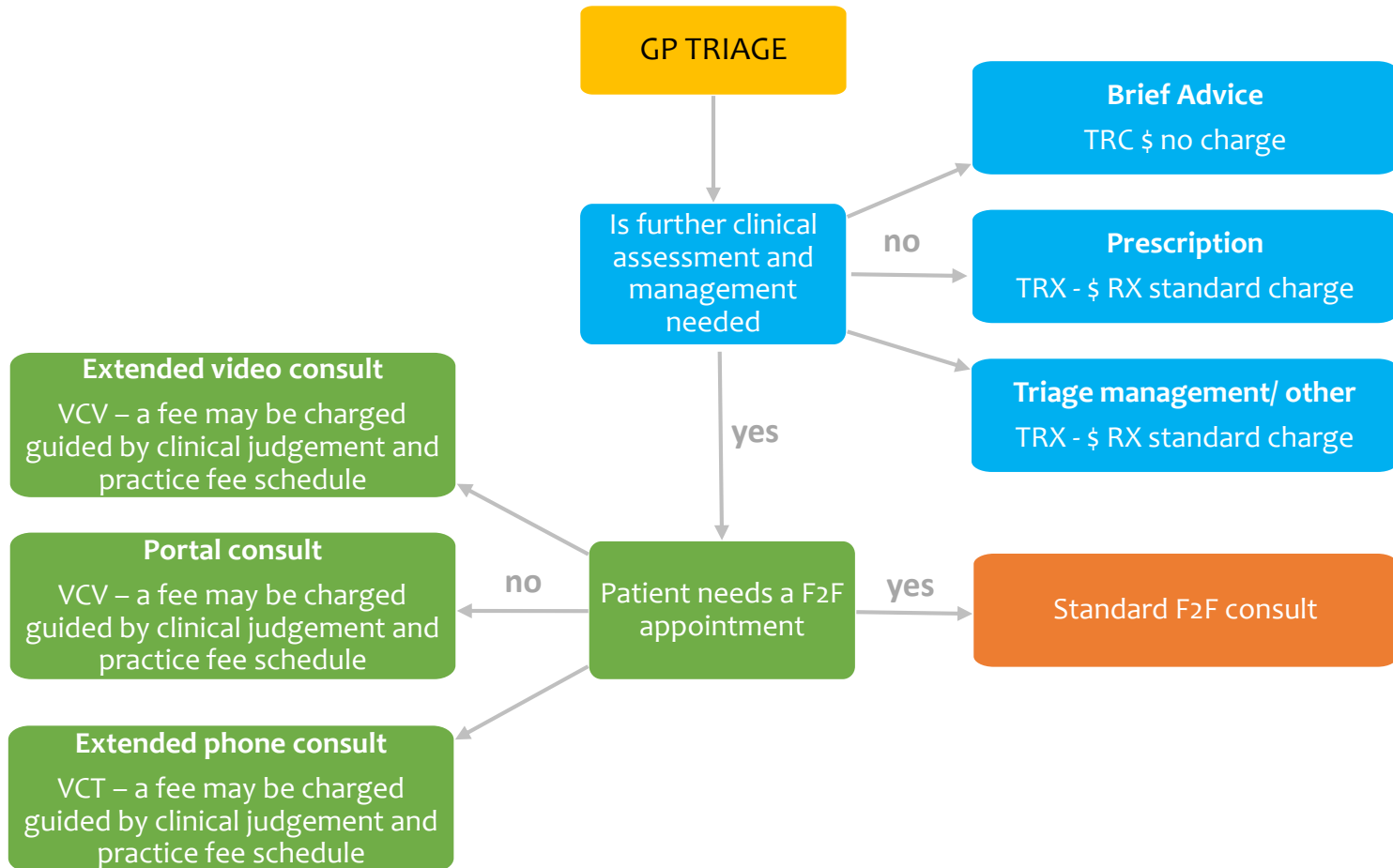
\$15.00 - Prescription
\$15.00 - Medical Certificate

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Parked

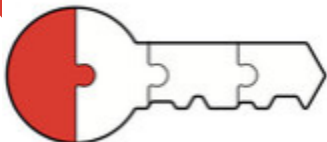


PATIENT CHARGES



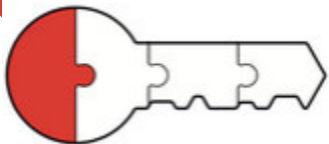
TEAM COMMUNICATIONS

- Introduce Clinical Triage concept at 'Whole of Practice' session
- Communications plan agreed by Change Team
- Utilise team/ role meeting
- Utilise 'huddles'
- Regular updates to all staff re implementations plan, outcomes, provider and patient feedback
- Share impact on practice on practice via reporting



PATIENT COMMUNICATIONS

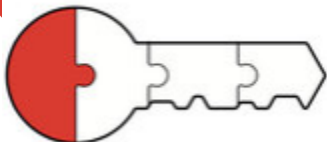
- Display posters in prominent areas at your practice
- Photocopy information onto the backs of invoices, statements and prescriptions
- Encourage reception and clinical staff to talk to patients about the service
- Change the telephone message to tell patients about the service
- Put information about the service on your website and social media
- At first, some patients may be concerned that the GP won't call back promptly. For this reason, it is important that the GP phone back the patient during the time frame given by the receptionist



EVALUATION

Consumer Feedback

- Give patients a follow up phone call a couple of days after they use GP triage to get feedback
- You may like to do this every day when you begin and then reduce the follow up calls to once or twice a week once you're satisfied that the feedback is consistently positive
- You can also invite patients who are triaged to come in for an appointment to complete a patient satisfaction survey
- Practice Consumer Focus Groups
- You can ask for feedback via your website and social media platforms



HARD COPY RESOURCES

- Call handler script
- GP phone triage script
- Pre work for phone triage
- Same day appointment demand template
- Call handling guide flowchart
- Charging guide

