Physiotherapy Clinic Redesign
Improving timely access and attendance in outpatients

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Case for change

The Physiotherapy Clinic Redesign project commenced to meet the growing demand for acute outpatient physiotherapy services within the Westmead Hospital catchment area. In 2012, 342 (40%) acutely referred patients breached the 14 day access time set as a Key Performance Indicator. Delayed access can lead to poorer post operative outcomes, increased disability and prolonged rehabilitation.

Furthermore, 991 (15%) booked appointments were not attended (Did-not-attend or DNA). Under ABF this represents a $200,000 in lost potential revenue annually.

Goal

The vision for the Western Sydney Local Heal District is “Better health service for the people of Western Sydney and beyond.” The goals of this project are to: a) Improve timely access for patients requiring acute physiotherapy to keep them healthy and out of hospital, and, b) Provide a high quality, well-managed service that seeks to make the most out of finite resources.

Objectives

1. To increase the percentage of acute patients who are seen in <14 days from 60% to 80% consistently from April 2014 onwards.
2. To decrease the percentage of appointments lost due to patient DNA from 15% to ≤11% consistently from April 2014 onwards.

Method

The Centre for Healthcare Redesign methodology has been used for this project. This included process mapping, patient interviews to hear from what patients experience, data collection and ongoing stakeholder engagement. Physiotherapy and administrative staff were consulted throughout the project via workshops, multi-voting and interactive presentations.

Diagnostics

Process mapping highlighted key issues:

- 40% of patients who are not always able to attend their appointment due to wait times
- 45% of patients who do not have a new appointment available within 14 days
- 50% of patients who do not always have a new appointment available within 14 days
- 60% of patients do not always have a new appointment available within 14 days
- 70% of patients do not always have a new appointment available within 14 days
- 80% of patients do not always have a new appointment available within 14 days
- 90% of patients do not always have a new appointment available within 14 days
- 100% of patients do not always have a new appointment available within 14 days

Planning and implementing solutions

36 physiotherapy and admin staff were consulted on key issues and solutions via workshops, multi-voting and working groups.

10 patients with 2 carers were interviewed to help establish key issues.

Solutions were put in place to address the key issues found in diagnostics (show in yellow):

- Admin staff enable patients to efficiently perform bookings due to waiting times
- Admin staff ensure that patients have a guarantied way to reach Department including after hours
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Results

Attendance in <14 day rates have fluctuated.

Non-attendance rates have begun to show positive trends toward reaching the goal of 11% and lower. However, the percentage of acute patients seen on time continued to ... This is largely due to implementation coinciding with periods of reduced staffing due to student holidays and annual leave.

Further redesign is now being considered involving increased utilisation of a student workforce and further changes to appointment structure. It is expected that DNA rates will continue to improve, but more dramatic changes may be required to achieve timely access for patients.

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Conclusion

The Physiotherapy Clinic Redesign project was successful presenting a strong case for change to staff as well as diagnosing and implementing a set of solutions. It has made performance monitoring part of our business. Non-attendance rates have begun to show positive trends toward reaching the goal of 11% and lower. However, the percentage of acute patients seen on time continued to perform poorly. This is largely due to implementation coinciding with periods of reduced staffing due to student holidays and annual leave.

Further redesign is now being considered involving increased utilisation of a student workforce and further changes to appointment structure. It is expected that DNA rates will continue to improve, but more dramatic changes may be required to achieve timely access for patients.