

Advanced Access and Efficiency for Primary Care

Quality Improvement in Action: Dr. Yasmeen, Hamilton Family Health Team

“We were inundated with appointments and the waiting room was packed. What we were doing just wasn’t working efficiently.” Sandra Gunby, an RN working with Dr. Naveda Yasmeen, describes the frustration the whole team felt before they decided to embark on their quality improvement journey to adopt Advanced Access. Patients were waiting weeks to get an appointment, the waiting room was frequently overflowing, front office staff had to deal with frustrated patients and staff regularly worked until 7 or 8 p.m.

Dr. Yasmeen’s practice is part of the Hamilton Family Health Team (HFHT) and has a roster of 1,878 patients. In February 2011, they participated in Health Quality Ontario’s (HQO) Quality Improvement Program—Learning Community Wave 2, to learn and apply the principles of Advanced Access and Efficiency. Team members included Wanda Harvey (practice manager), Dr. Naveda Yasmeen (physician), Sandra Gunby (RN), Margie Stuart

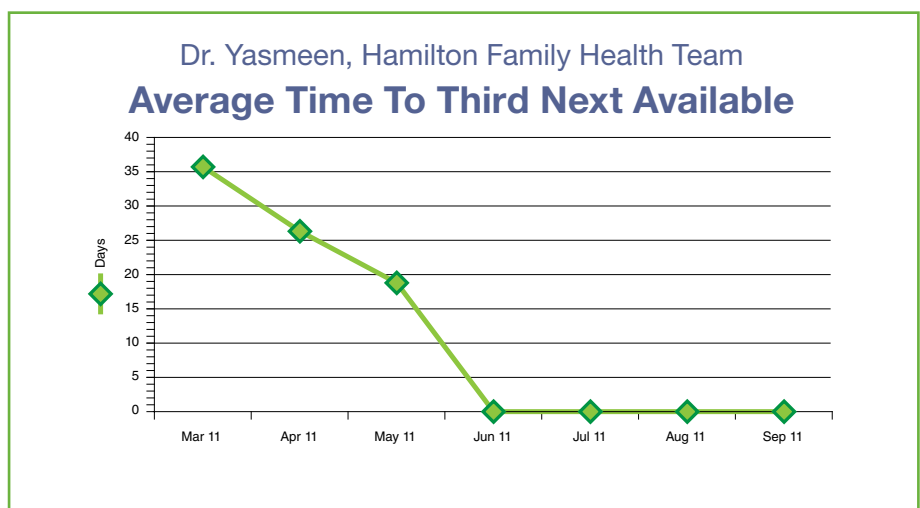
(RN), Mary Newman (mental health counsellor), Jennifer Fowler (registered dietitian) and Marlene Bell (front office staff).

Wanda, Marlene and HFHT’s internal practice facilitator, Jennifer Graper, attended the learning sessions, where participating teams meet to learn about the principles of advanced access and to share ideas about best practices and change ideas to improve access, so that patients can have an appointment when they need care. Marlene was enthusiastic in her praise for the session: “It was very informative and so motivating. We went to that full-day meeting and thought, we need to do something, now!”

Getting Started: Reducing the Backlog

The team’s first task was to get a better understanding of whether their supply of appointments met their patients’ demand for

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The practice reduced its average time to third next available appointment (TNA) from a baseline number of 35.7 days, in March 2011, to zero in June 2011, and has stayed at zero ever since. Its no-show rate (patients not showing up when scheduled) has also dropped dramatically, from 16.6% to 2.9% (March to June 2011) as a byproduct of the reduced TNA.

appointments. By looking at some key metrics about their panel size and number of days worked, they were able to see that if they reshaped their daily schedule by offering more appointments they would have enough supply to meet the demand each day.

They also did some cycle time and patient continuity testing, to determine the total amount of time patients were spending in the office

waiting room not being packed, it's such a relief. And to have grateful patients, instead of frustrated ones, on the phone!" Everyone's quality of life has improved: Both providers and staff regularly go home on time, for example. "We worked hard to get that backlog down — stayed late for weeks, most of us — but that's okay," says Dr. Yasmeen. "We knew we had to work harder this once and then it would be a lot better."

The team's advice to other practices considering this kind of change is simple: "Just go for it: Set a date and work towards it. You'll work harder for a couple of months, but the payoff is worth it." The practice's gains have been sustained, and it is now focusing on efficiency measures, such as standardizing examination rooms, and on bringing the practice's other physician on board.

THE SIX PRINCIPLES OF ACCESS

1. Understand and balance supply and demand
2. Increase the supply of visits
3. Reduce demand for visits
4. Reduce appointment times and types
5. Reduce backlog
6. Develop contingency plans



Left to right: Sharon Brunacionni, Marlene Bell, Margie Stuart, Wanda Harvey, Sandra Gunby and Dr. Naveda Yasmeen (seated).

and the amount of time spent face to face with their provider.

Beginning March 1st, the team began reducing the practice's backlog, with a goal of going live with an Advanced Access appointment schedule on June 1st, when all patients calling in would be given same- or next-day appointments (or the day of their choosing). The team's findings — that the practice's demand for appointments was significantly higher than its supply — clearly demonstrated the need for an increase in the supply of available visits, and that Dr. Yasmeen needed to increase her availability if the initiative was going to be successful. The findings convinced Dr. Yasmeen to begin offering afternoon time for appointments, and she went from working three days a week to five, so that she could eliminate the backlog. Today, Dr. Yasmeen is available four to four-and-a-half days a week to meet current demand, so that patients can access care when they need it.

Putting Change Into Action

At first, patients were confused by the change. This feeling was soon replaced by one of pleasant surprise, however, as patients discovered they no longer had to wait for an appointment spot to open up the following week, or even later. "Absolutely marvelous, I'm seen the day I am actually sick," enthused one patient. "Everybody was surprised that they could actually come see us the same day. They were so pleased, and excited, about the change," noted Marlene.

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Questions? Contact us at: learningcommunityinfo@hqontario.ca or 1-877-794-7447, ext. 201.

About HQO

On April 11, 2011 the Ontario government announced the formation of Health Quality Ontario (HQO). HQO is a government agency that combines the expertise of the Ontario Health Quality Council, the Medical Advisory Secretariat, the Ontario Health Technology Advisory Committee, the Ontario Health Technology Evaluation Fund, the Centre for Healthcare Quality Improvement and the Quality Improvement and Innovation Partnership.