Steps to enhance practice efficiency:

part 2 — from challenge to solution

by OMA Practice Management and Advisory Services

Every day, physicians face increasing demands outside of the patient visit. These demands, along with the administrative responsibilities of operating a practice and the core responsibilities of providing care to patients, can result in long waits, bottlenecks, and extra hours spent catching up on tasks. All of this has the potential to create high stress levels and feelings of burnout among physicians and staff.

Last month, we looked at some of the methods that can be used to measure patient flow in a practice.[1] Hopefully, you have had an opportunity to employ some of these methods and now have a better understanding of patient flow in your practice. Equipped with this knowledge, you can begin to identify what your ideal state looks like, and then to develop the goals and the methods to help you achieve it.

In this article, we begin to identify opportunities to address the bottlenecks and pressure points in order to help redirect your patient flow.

Efficient Office Design

There are many factors to consider when planning an office layout, including patient care needs, technical specifications, regulations and visual appeal. While these elements are important they do not address function. Attention to traffic patterns and positioning of equipment will lead to an ideal design that meets the needs of your practice and your patients.

Practices typically allocate two exam rooms and one office space per physician. New office design builds on this to introduce "touch-down spots" and "swing rooms" to help increase efficiency.

• Touch-down spot

A touch-down spot is centrally located within the office and is in close proximity to the exam rooms. The objective of this space is to keep the physician in the centre of the flow. A touch-down spot can be a high table where physicians can stand in order to write notes or complete any paperwork following the patient visit. Access to a telephone and computer at the touch-down spot allows the physician to perform tasks without having to travel between a back office and the exam rooms.

• Swing room

A swing room is an exam room equipped with only chairs and minimal supplies that can be used for patient visits that require no physical exam. The use of a swing room allows a physician to keep patient flow moving even in situations where the previous patient takes longer leaving the exam room. It is important to use the swing room appropriately, moving patients from the waiting room to the swing room just for a further wait without diminishing the wait time does not improve patient flow and simply becomes another holding area.

Patient flow extends beyond the traditional in-person visit. When patients are not able to access the office by phone there is potential for them to become anxious about their general ability to access care.

Proximity is another key consideration in efficient office design. Distance from the door to the front desk, front desk to waiting room, waiting room to exam room, and even proximity to office and medical supplies, can impact the day's flow. Having to travel long distances or cross over other work spaces slows process and results in delays.

Proximity to office and medical supplies can also result in inefficiencies, as illustrated in the example used last month,[1] where a physician had to leave the exam room twice for medical supplies and a printout (see Figure 1, below).

Exam room standardization is a common technique used to improve efficiency. Stocking exam rooms with the same supplies, in the same or similar set-up, allows the physician quick and easy access to supplies required during a visit.

Address Bottlenecks

Once the process of measuring patient flow has been completed, it is likely that bottlenecks will have been identified. Understanding the cause of these bottlenecks will help to devise solutions.

The team at NEOMO Medical in Sudbury identified a common challenge faced by many physicians: "It doesn't seem to matter what time patients' appointments are scheduled in the morning," explains Dr. Reena Dhatt. "Everyone shows up early, usually at the time the office doors open." This results in a bottleneck at registration and delays of up to 30 minutes before they day even begins.

After many attempts at process refinement, Dr. Dhatt and her team developed a mobile solution. The Patient Self-Registration Kiosk was created in conjunction with Cambrian College through a FedNor initiative. The Patient Self-Registration Kiosk allows patients to check-in through one of two tablets made available in the front-desk area (see image, opposite) or through their mobile device.

The patient self-registration process is simple and straightforward: patients enter their name, the clinic they are attending, and their most responsible physician before proceeding to the waiting area, thereby avoiding a lineup at the desk. Notification is sent to front-desk staff and they either check the patient in through the electronic medical record or followup with the patient for any additional information required.

A patient experience questionnaire asking about the process is included at the end of the self-registration.

"Overall, people like it a lot," says Dr. Dhatt. "Even our older patients are using it with some help from others."

Front-desk staff is still available for those who need or want assistance, however, the Patient Self-Registration Kiosk helps to alleviate pressure at high-volume times of the day, typically first thing in the morning and after lunch.

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Dr. Dennis DiValentino, a family doctor in Hamilton, explains that one

Figure 1: Patient Flow   ■ Value ■ Waste
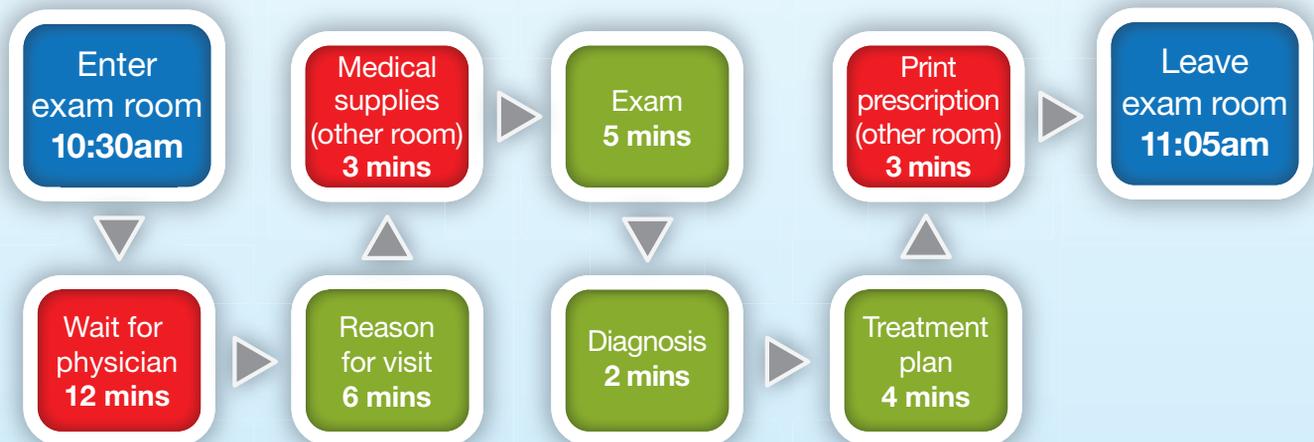
of the biggest challenges in running an efficient office relates to patient communication: "When communication about office policies, procedures and the general management of their care is good, patients are most pleased and when the patients are most pleased, provider satisfaction is optimized."

Dr. DiValentino and members of the office staff identified a struggle in meeting the high volume of calls in a day, which resulted in missed calls and time lost trying to catch up.

The team used data from their Voice over Internet Protocol (VoIP) phone system to identify the times of day when call volumes were highest, as well as times when they were lowest. VoIP phone systems use the Internet rather than traditional phone lines to connect voice communications. VoIP phone systems include a number of additional functions that can be beneficial, such as the ability to generate reports about their use (e.g., volume of calls, missed calls, etc.).

Through this activity, the team was able to see that high-volume call times were occurring at the same times each day, as were times of low and medium call volume.

"With this new information we were able to add additional support to the phone lines during high volume times" said Dr. DiValentino.

This information also allowed them to make better use of low-volume times by assigning staff to perform other office tasks during those times.

"We no longer needed to 'play catch-up' during those times, and patients were much happier," he said.

Scheduling, Scheduling, Scheduling
Scheduling patient visits appropriately will help prevent backlog and allow physicians to complete all required elements of the visit within the allotted time. The approach to scheduling is often defined by personal preference; identifying goals related to time management can be helpful in choosing how you want to address challenges with scheduling.

If, for example, a goal is to leave the office on time with all paperwork complete, it becomes necessary to sched-
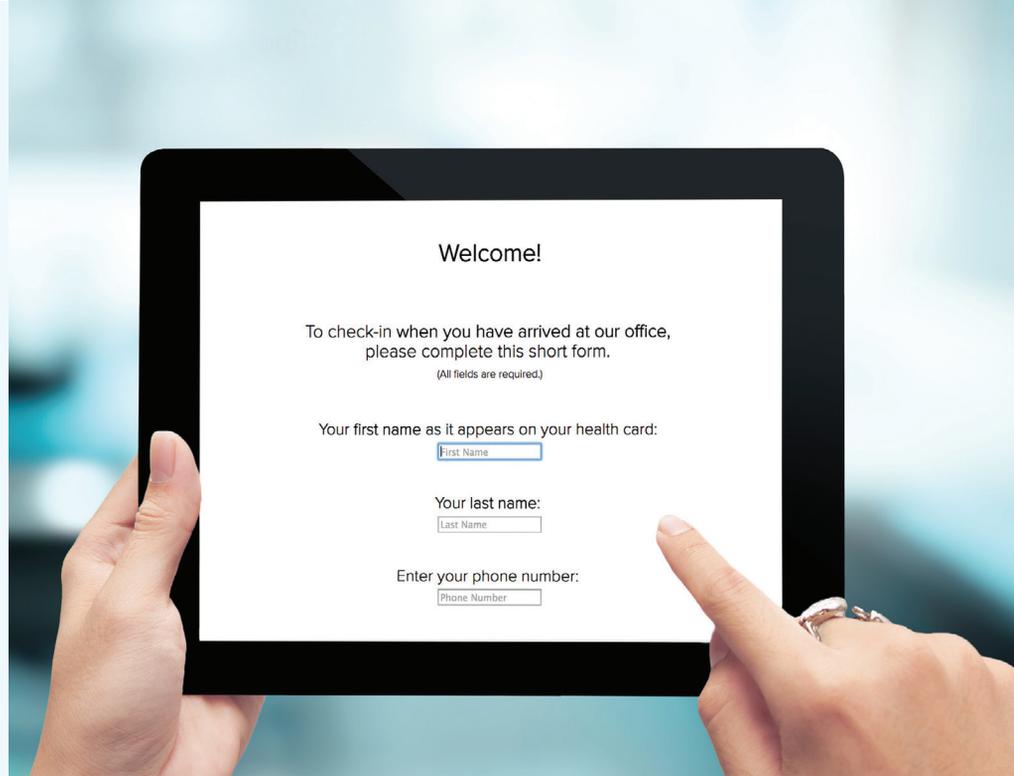
A Patient Self-Registration Kiosk allows patients to check-in for their appointment through a tablet located at the front-desk area of the medical office.

ule dedicated time in the day for this important task. Some physicians prefer to complete all or as much paperwork as possible at the end of each visit and so require additional time allotted for this at the end of each exam.

Another approach is to schedule blocks of time dedicated to administration (for example, every fourth appointment block), as this provides dedicated time to manage phone calls, prescription refills and other non-visit-related tasks required of physicians.

Visit planning is the process of previewing the day's charts in advance to ensure all required forms and test results are included so that the physician can spend the scheduled visit time with the patient and not tracking down information. Another benefit of visit planning is the ability to prepare the exam room for the visit by stocking necessary supplies and equipment.

Visit planning can be done by both the physician and office staff. Setting aside 20 to 30 minutes at the start of each day or conclusion of the previous day for this important task can save time in the end, allowing you and your staff to finish the day on time.

We often think of inefficiencies in patient flow resulting from a visit that goes over the allotted time. An overlooked opportunity to recover lost

time upfront is scheduling patients to arrive at the office ahead of the visit in instances where they are required to complete any forms. For example, if the physician visit is scheduled for 9:30 a.m. but requires 15 minutes of paperwork, schedule the patient's appointment for 9:15 a.m. Likewise, notations on a patient's chart or followup form identifying the time required for the next visit will assist office staff in scheduling appropriately (e.g., followup in six weeks for 30 minutes).

In the next article we will look at how technology can be used in a practice to improve efficiency. ∎

Reference

1. Steps to enhance practice efficiency: part 1 — measuring patient flow. *Ont Med Rev*, April 2016 Vol. 83, No. 4. pp. 20-24. Available online at https://www.oma.org/Pages/OMR.aspx.