

Where Do Our Patients Go?

Minimising The Risk of Patients Slipping Through The Gaps

Prepared by

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The previous state

- Patient confirmation of appointment introduced in 2005
- FTA reduced from 25% to 10 – 12%
- Patients who hadn't confirmed were removed from the appointment scheduling list with no clinical notification or input
- Patients who failed to attend sometimes had clinical review and direction
- Sometimes this clinical direction was actioned
- When a patient left their appointment, they did or didn't rebook or notify admin staff of discharge from clinic or ongoing care
- GPs never informed of removal for Did Not Respond (DNR)
- GPs sometimes notified of Fail To Attend (FTA)

Clinical concerns

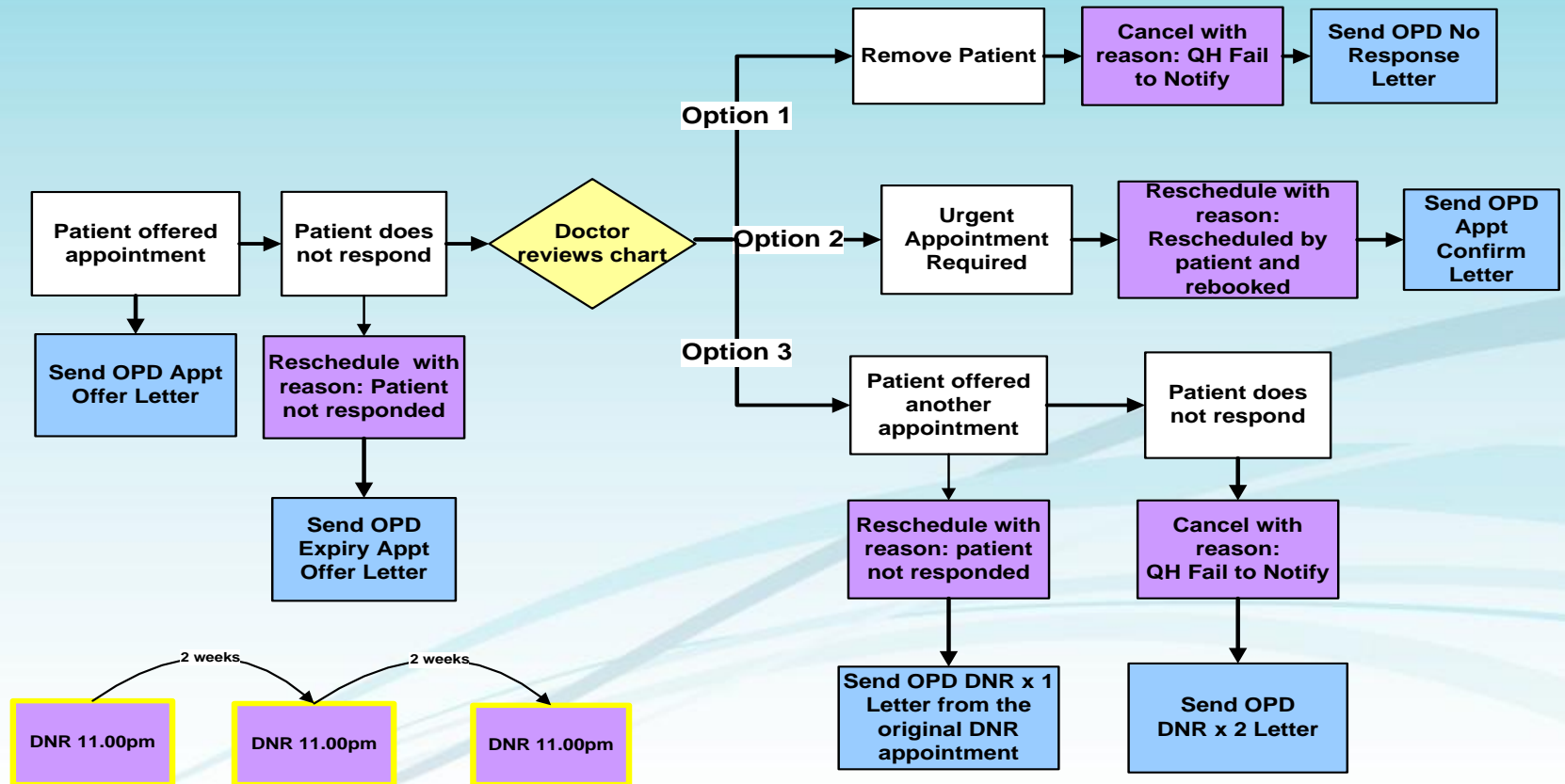
- Patients with a clinical need for specialist consultation removed from appointment schedule with no clinical consultation or GP notification
- Lack of clinical consultation with DNR/FTA patients placing patient's health outcome at risk
- Organisationally unable to identify the outcome of DNR, FTA or consultation
- Having to order medical record to identify outcome of appointment and next care
- Unable to electronically track the outpatient journey of each patient – failing to meet continuity of care
- Patients placed at risk when care continuum interrupted

The Action

- Working party for DNR and FTA established – clinical and administrative staff
- Current clinic processes and forms reviewed
- New standardised forms created
- Chart identifier tags developed
- Current scheduling system pathway for DNR and FTA patients for reviewed
- New scheduling system pathway developed for DNR and FTA patients
- New pathway ensures patients are electronically tracked and clinician review is sought and actioned
- DNR and FTA slots excluded from OOS count

DNR pathway

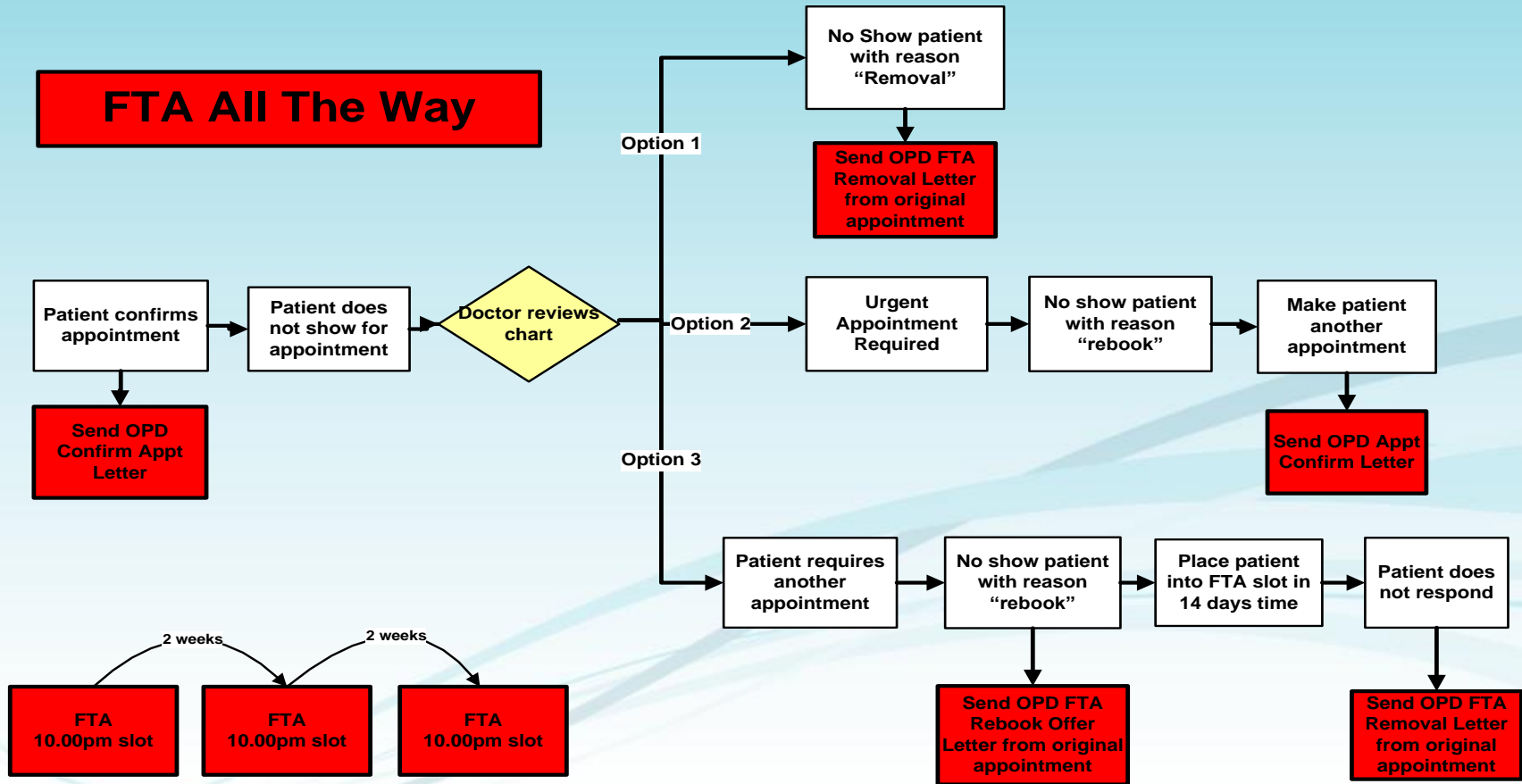
Did Not Respond (DNR 11.00pm slots)
DNR Stay As They Are



FTA pathway

Fail To Attend (FTA 10.00pm slots)

FTA All The Way



DNR sticker

DID NOT RESPOND (DNR)

New Patient Review Patient 1st DNR 2nd DNR

REMOVE – return patient to their designated practitioner

OFFER next available appointment

CONTACT the patient to confirm appointment within **TWO WEEKS**
(overbook if required)

Clinician's Name:.....Dsgn:.....

Signature:.....Date:..... / /

FTA sticker

FAILED TO ATTEND (FTA)

New Patient Review Patient 1st FTA 2nd FTA

REMOVE – return patient to their designated practitioner

OFFER next available appointment

CONTACT the patient to confirm appointment within **TWO WEEKS**
(overbook if required)

Clinician's Name:.....Dsgn:.....

Signature:.....Date:..... / /

Chart identifiers (DNR & FTA)

DNR – CHART

Your patient and their designated Practitioner were notified on two occasions of today's OFFER of appointment.

Your patient **'DID NOT RESPOND'** within the 14 day Time frames, at this time a second correspondence was sent to The patient and their designated Practitioner which there has Also been no response to.

For clinical reasons, please review the patient's medical record and Indicate what actions you request in the stamped area in the pateint's Medical record.

YOUR OPTIONS ARE:

- **'REMOVE'** the patient – from the appointment schedule and return to the care of the designated Practitioner. Correspondence regarding this will be sent to the patient and the designated Practitioner notifying them of your decision.
- **'OFFER' ANOTHER APPOINTMENT** – The patient and their designated Practitioner will be sent correspondence requesting them to contact the hospital within the next 14 days to arrange an appointment. The appointment will be arranged for the time frame you specify.
If the patient does not contact the hospital within the time frame they may be removed, and returned back to the care of the designated Practitioner.
- **'URGENT REBOOK' APPOINTMENT (WITHIN 2 WEEKS) – FOR CLINICAL REASONS, THE PATIENT REQUIRES AN APPOINTMENT URGENTLY - (Category 1 or high risk patient)** Overbooking of your clinic may be required to accommodate this request.
Department contact protocols will be implemented, both your patient (and as required) their designated Practitioner will be contacted in order to ensure an appointment is confirmed.

DO NOT RETURN THIS CHART TO MEDICAL RECORDS UNTIL THE DNR HAS BEEN ACTIONED BY THE DESIGNATED PRACTITIONER AND DNR PROCESS COMPLETED

F: ADMINISTRATION FORMS /DNR notice -PURPLE.doc
23/03/2011

FTA – CHART

Your patient and their designated Practitioner were notified of today's confirmed booked appointment.

Your patient has **'FAILED TO ATTEND'** this appointment

To maintain patient safety, please review the patient's medical record and indicate what actions you request in the stamped area in the patient's medical record.

YOUR OPTIONS ARE:

- **'REMOVE'** the patient – from the appointment schedule and return to the care of the designated Practitioner. Correspondence regarding this will be sent to the patient and the designated Practitioner notifying them of your decision.
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F: ADMINISTRATION FORMS /FTA notice -RED.doc
23/03/2011

Compulsory check out

- Compulsory check out introduced to ensure patient journey electronically recorded

Check-Out reasons

- Admit to inpatient
- Discharge from medical service
- Diverted to other treatment
- Follow up appointment required
- Referred on
- Referred to elective surgery

How has this helped?

- No occasion of service can be closed without a check out reason being recorded
- Allows clinicians to find out 'what happened to that patient'
- Reporting to theatre case managers on patients referred to theatre – ensures paperwork has been completed and sent on
- Ability to answer patient or clinician enquiry without ordering the medical record
- Useful data for service planning and patient flow planning

A side issue

- Chart review slots created in each clinic
- Ensuring clinical consultation occurs with patient cancellation and rescheduling of appointments
- Tracking patient enquiry/phone request
- Chart review slots excluded from OOS count

Outcomes

- DNR patients have clinical review of medical record and clinical guidance on next action
- FTA patients have clinical review of medical record and clinical guidance on next action
- Patients who cancel or reschedule 4 weeks outside time frame are scheduled for a clinical chart review
- FTA dropped from 10 – 12% to consistently 6%
- Clinicians able to electronically track the outpatient journey
- Safety net under patients referred to theatre
- Data successfully used in business cases
- FTA, DNR and chart review data identifies non OOS activity for business planning

Future improvements (and wishful thinking)

- Improve clinic management of compulsory check out
 - Electronic management of all referrals
 - Self check in
 - Integration with electronic medical record – appointment scheduling
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