



Improving the delivery of outpatient services

Lessons from advisory assignments

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KPMG Advisory

Session overview

- This session covers lessons learnt from a range of client assignments regarding outpatient services from three perspectives:
 - **Policy/system level**
 - **Outpatient strategy at hospital/health service level**
 - **Redesign of services**

Lessons at policy/system level 1

- **Outpatient services have been given relatively little policy attention compared to other aspects of service – this is a common feature across many health systems. More positively, this is now changing**
- **There is often no articulated rationale for the purpose, role and function of outpatient services at policy level**
- **As a rule there are no clearly articulated or consistently applied models of provision**
- **Service delivery has developed on an incremental basis**
- **There tends to be no clear policy or planning framework for outpatient services at system level**

Lessons at policy/system level 2

- **Funding approaches drive provision – this can lead to models that are not appropriate for patient needs and circumstances**
- **There is fragmentation of care within the dual funding system between State and Commonwealth**
- **There are no clear drivers to support rational and consistent use of services**
- **Use of hospital outpatient services is often driven by patient financial reasons**
- **There are weak system-level incentives to promote alternative models and patterns of provision**

Lessons at policy/system level 3

- **There is evidence of innovation and development of new models but this is not systematically supported or disseminated through policy**
- **Traditional models of outpatient services predominate in terms of both professional roles and location of provision**
- **Linkages with professionals outside the hospital system are generally under-developed**
- **Routes into and out of services are poorly defined and not proactively managed**

Actions at policy/system level

- **At policy level there is a need to:**
 - Provide services in line with defined principles which justify the use of outpatient services
 - Clearly articulate the role and function of outpatient services
 - Develop a clear planning framework for outpatient services
 - Develop more sophisticated funding mechanisms

Lessons at hospital/health service level 1

- **Mixed funding mechanisms have led to largely ad hoc, unplanned and poorly coordinated patterns of service**
- **There is often a lack of strategic vision for outpatient services**
- **There is limited clinical leadership and executive management input to outpatient services**
- **The role, purpose and place of outpatient services in the wider spectrum of care is often not formally defined or commonly understood**
- **Frameworks and processes for reporting, monitoring and reviewing performance are weakly developed**

Lessons at hospital/health service level 2

- **Hospital outpatient services tend not to form part of integrated networks of service delivery**
- **A traditional, hospital-based, medically-centred model of outpatient consultation predominates**
- **Decentralisation of outpatient service delivery is the exception rather than the rule**
- **As a rule service delivery arrangements are not patient-centred**

Lessons at hospital/health service level 3

- **General absence of criteria and processes to manage access to outpatients at both specialty/service and organisational level**
- **Underdeveloped systems, processes and culture to manage referral back to primary care with a tendency for patients to get “stuck” in the system**
- **Inefficient use of outpatient resources through lack of clear expectations and requirements for pre-referral patient work-up**
- **Insufficient engagement with external partners in the planning and review of services**

Lessons at hospital/health service level 4

- **The important role of outpatient services in supporting training and development of health professionals is often asserted but poorly defined**
- **Training is more based on absorption through volume of exposure rather than quality of experience or a focus on attainment and honing of specific skills**

Actions at hospital/health service level

- **There is a need to:**

- Ensure clarity of strategic vision and purpose for outpatient services
- Develop more proactive systems for management of access and patient flow
- Develop services in partnership with external players
- Develop networks of care with clear roles for different professionals and agencies

Lessons from service redesign initiatives 1

- **Reflecting the more general lack of policy and strategic attention, there has been limited application of service redesign and improvement initiatives to outpatient services specifically or as part of broader programs of action**
- **Significant opportunities exist for flexible and creative use of outpatient services in improving delivery of services**
- **Outpatient services are often not viewed as a redesign solution reflecting more general disregard for this mode of service delivery**

Lessons from service redesign initiatives 2

- **Outpatient services have potential as part of ambulatory alternatives to admitted care. Rapid access to assessment in an outpatient setting can reduce pressure on EDs and beds**
- **Flexible capacity to support rapid access assessment is needed – this requires a shift from the long-wait culture**
- **More attention appears to be given to redesign of outpatient systems than on wider demand and capacity considerations**

Summary

- **A more explicit focus and attention on outpatient services is required at all levels**
- **Planning of outpatient services should not be conducted in isolation but as one aspect of development for individual services**
- **The role and function of outpatient services should be defined and articulated to ensure effective use of this care modality**
- **Clear policy and strategy around outpatient services is needed**
- **Systems and services are moving in the right direction**



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