

# Watsonville Health Center Enhanced Access Project

SNCC PCMH Initiative  
November 18, 2011



# WHC – Enhanced Access Project

Our team AIM is...

*to establish enhanced access scheduling for all Primary Care Providers to improve patient access.*



Progress toward achieving our aim is measured by....

*reduction of number of patients on daily waiting list*

*a reduction in same day appointments or slots not filled*

*patient and provider satisfaction*

*improved continuity*

# Proposed Plan...

- *Monitor appointment demand by day of the week, morning, afternoon and evening session and provider over several months including holiday, furlough weeks*
- *Add same day appointments to meet measured demand*

# What we achieved...

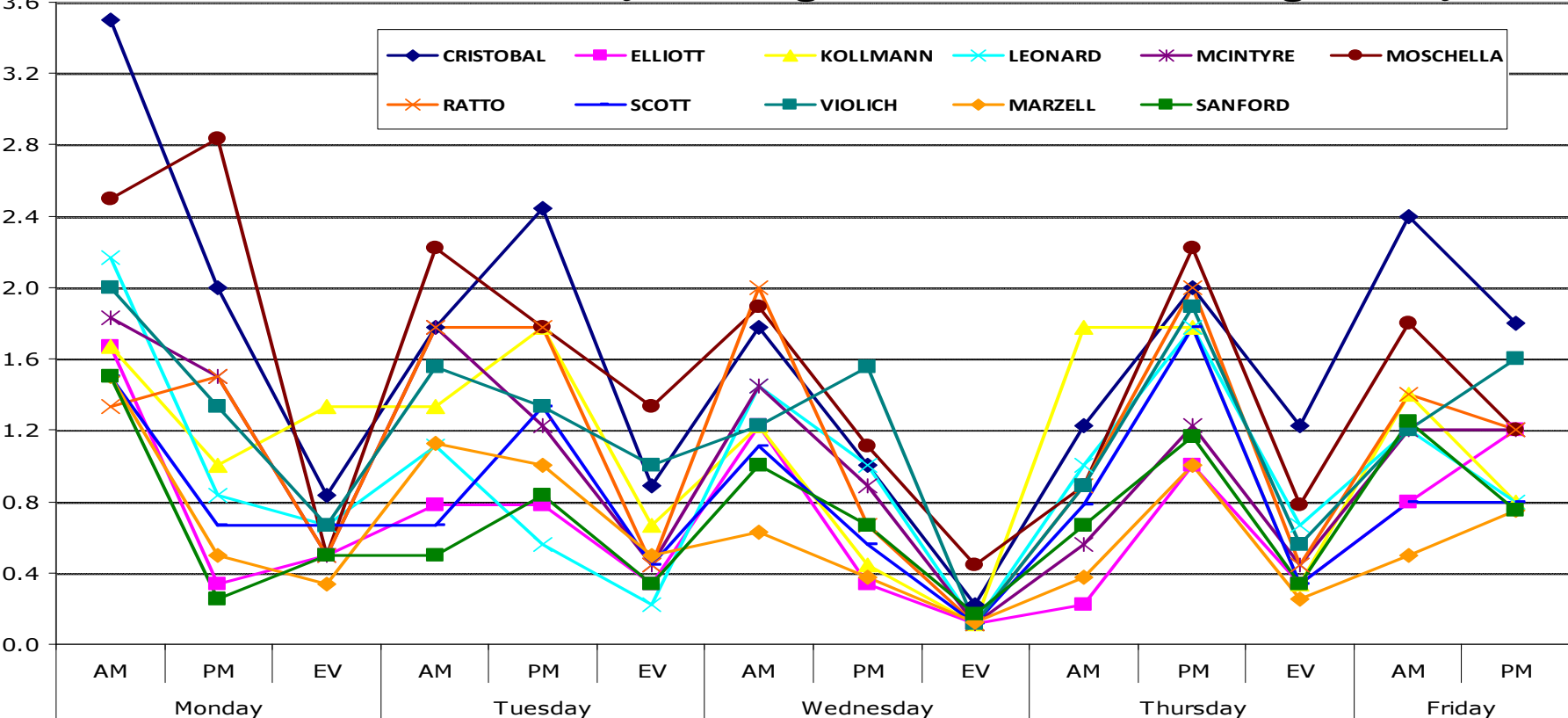
*Monitored demand for 5 months*

*September 2011, First analysis of data (three months June - September)*

- *Most demand on Mondays demand average 21 on non post furlough/holiday Mondays*
- *Post furlough Mondays demand range 16-45 with four data points*
- *AM same day appointments scheduled before 9:00 often do not get filled*
- *no same days appointments scheduled for evening sessions*

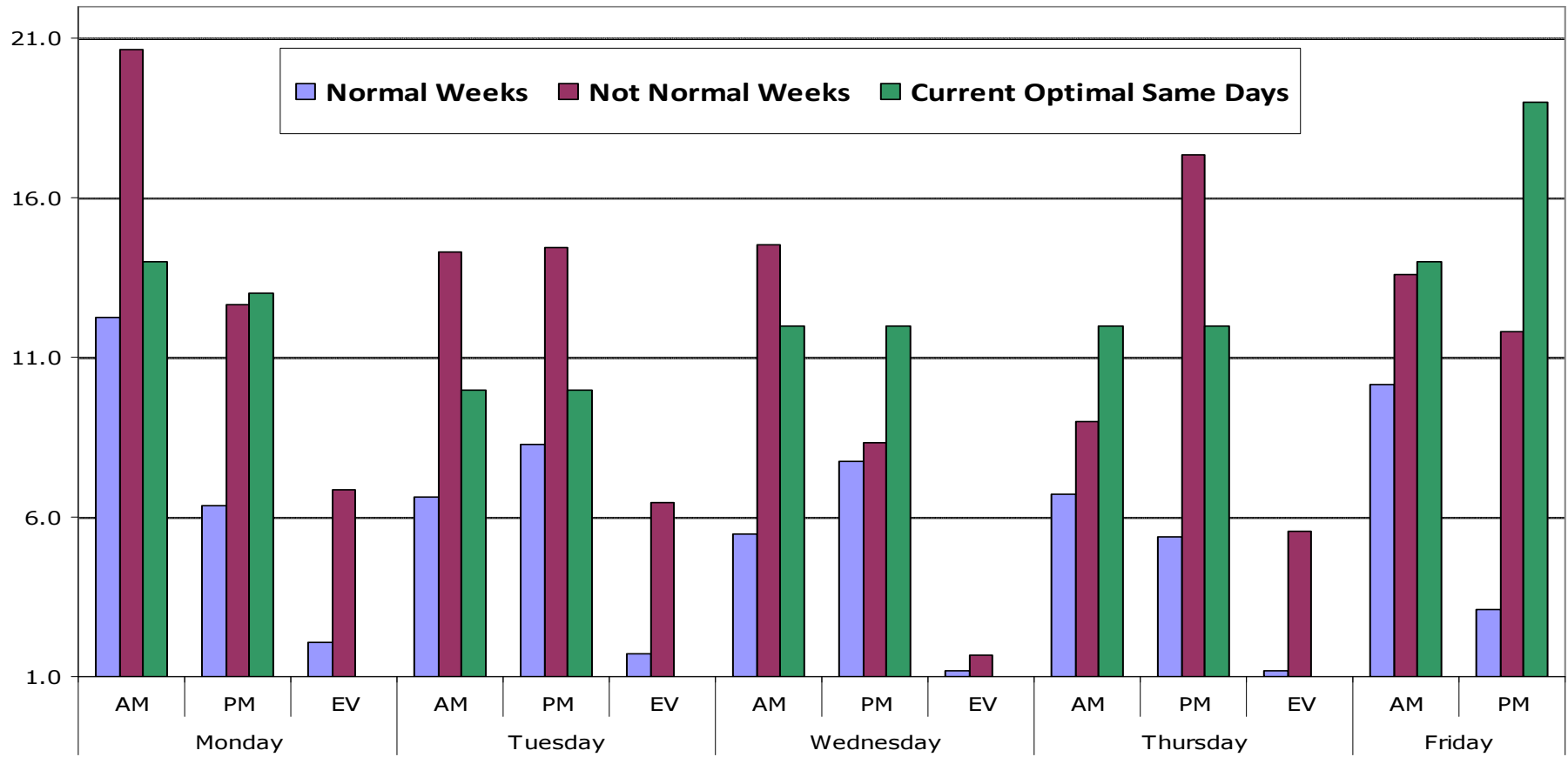
# Measured results...

**Same Day Demand Average by Provider  
 June 6, 2011 through October 31, 2011  
 Not Normal Weeks (Holiday, Furlough, or Weeks after Furlough Fridays)**



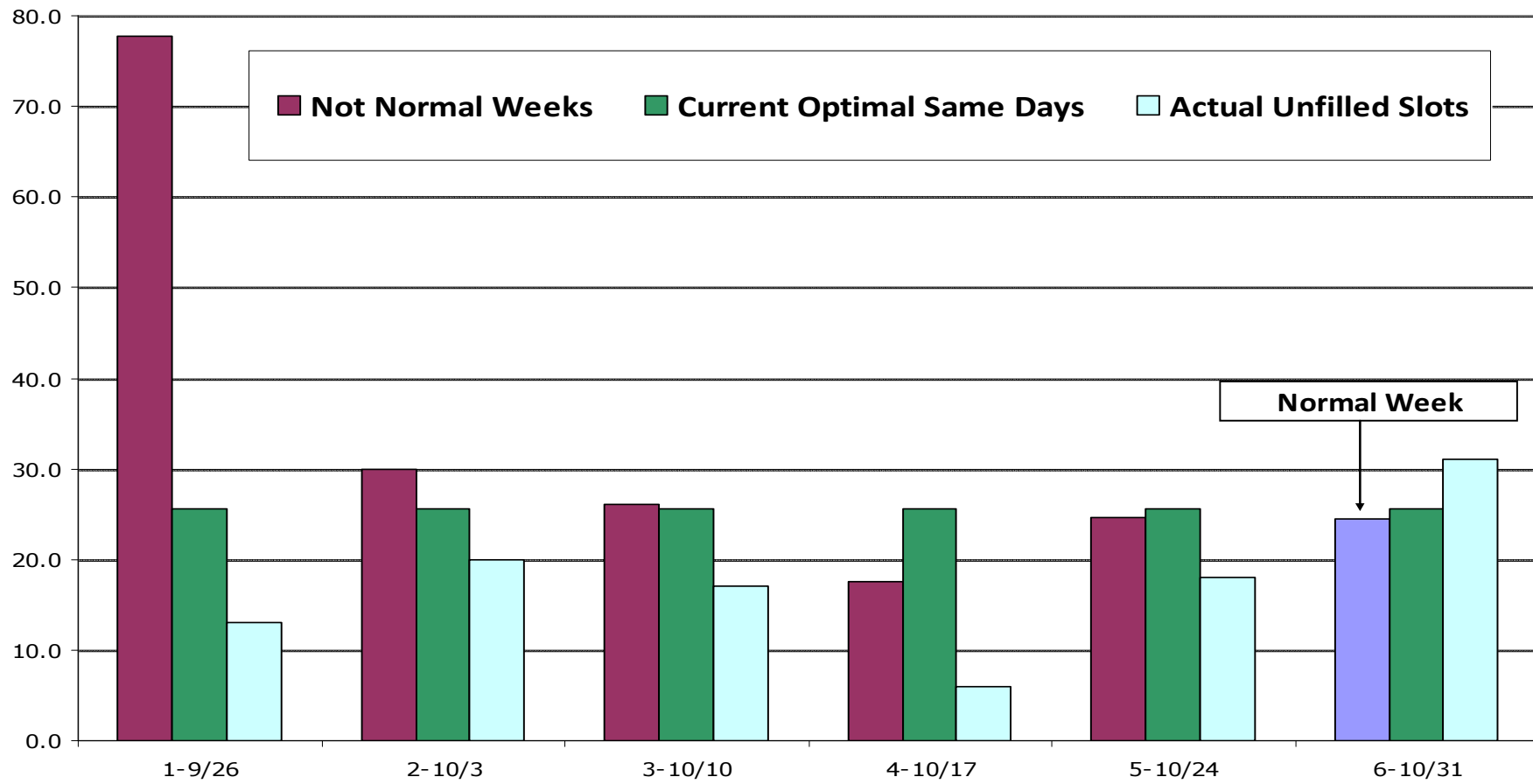
# Measured results...

**Same Day Demand Average for Watsonville Health Center  
June 6, 2011 through October 31, 2011**



# Measured results...

**Same Day Demand Average With Actual Unfilled Slots  
Six Weeks - September 26, 2011 through November 4, 2011**



# What we achieved (continued)...

*Initial Schedule Changes for Enhanced Access built into schedule starting 11/1/11*

- 1. Add one same day appointment per provider on Monday evenings*
- 2. Add one same day appointment Monday AM; add one same day appointment Monday PM*
- 3. Move all AM same days to after 10:30 so as to facilitate filling.*

# What we achieved (continued)...

## Revised Plan

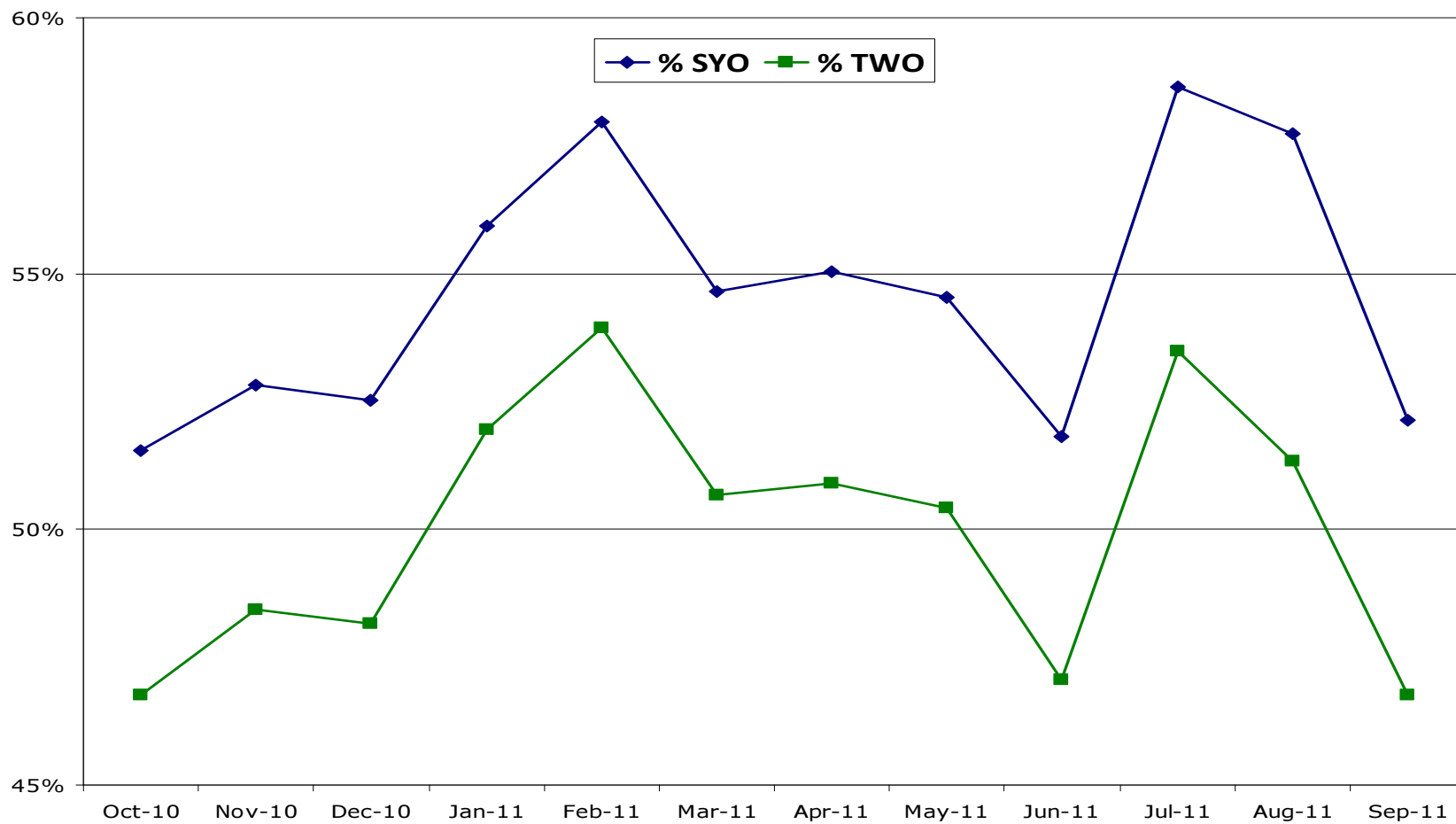
- *Three appointment types: 24 h window (same day), 7 day window (urgent, advanced access or follow-up), traditional follow-up or open slots (not specified by annual, well child care)*
- *40%/40%/20% goal: 40% traditional appointments or open slots (currently 64%), 40% advanced access 7 day (extended from 3 day due to part time providers) (currently 18% and not restricted to 7 days), 20% urgent or same day, 24 hour (currently 18%)*

# Lessons learned...

- *We have unfilled same day slots; poor distribution of same day slots*
- *Part time provider issue urgent appointments within 7 days rather than 3 days*
- *Continuity analysis patient centered and provider centered ideal 80%/80% but currently more provider centered than patient centered; goal patient and provider satisfaction*

# Measured results...

**Continuity of Care**



# Where we go from here...

- *Adjust distribution of same day slots*
- *Improve 40/40/20 mix primarily by increasing urgent slots (within 7 day appointments)*
- *Set up a monitoring system to shift open slots to urgent slots on at least a weekly basis*
- *Monitor abandonment of calls*
- *Three no shows: a letter is sent to patient stating can only schedule same day appointments (already in place)*
- *Explore group visits: urgent care; new patient orientation; diabetes*

# Where we go from here...

- *Contingency plans for provider illness – fill in other staff; poach appointments; provider reviews schedule for recommendations for rescheduling*
- *Need to define ideal capacity and exam room utilization*
- *Minimize different appointment types/times; appointment type 15/30 vs. 20 minutes*