



Use of a novel queue management software program to improve patient satisfaction at a large urban GUM clinic

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Introduction - I

- Open access services have important individual and public health benefits
- Sexual & reproductive health clinics vary in their balance between open access and appointments
- Patient expectations can be hard to manage when an open access service is being delivered

Introduction - II

- Our service is predominantly open access (Seven open access slots for each appointment)
- The service has been engineered to manage a high throughput of patients with:
 - Patient self-triage
 - Matching need with staff competency
 - Senior model
- These changes have been unable to cope with weekend rush, especially on a

Introduction - III

- Waiting times can exceed three hours
- More patients than seats in waiting room
- The results were:
 - patient aggression towards reception staff
 - poor patient feedback
 - staff complaints with Incident reporting forms (IR1)
- We therefore introduced new software in October 2014 to see if it could improve patient satisfaction

Methods - I

- The web-based software was introduced for weekend services in October 2014
- It was only used in those patients who self identified as symptomatic
- If patient agreed to be added to software their first name and mobile were used
- Once the patient was called in by a clinician they were 'served' on the software

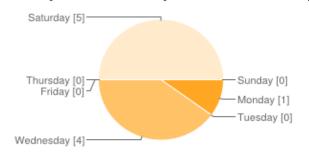
Methods - II

The estimated and actual waiting times were captured by the software

- In the four months before and after implementation we reviewed:
 - Staff survey
 - Patient comment cards
 - Staff feedback
 - Number of IR1 reports filed by staff

Results I - Staff survey

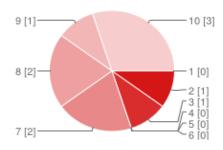
What day of the week do you think is worst for patient complaints about waiting times?



Sunday	0	0%
Monday	1	10%
Tuesday	0	0%
Wednesday	4	40%
Thursday	0	0%
Friday	0	0%
Saturday	5	50%

0%

On a scale of 1-10 how much stress do you get from patients who have been waiting a long time?

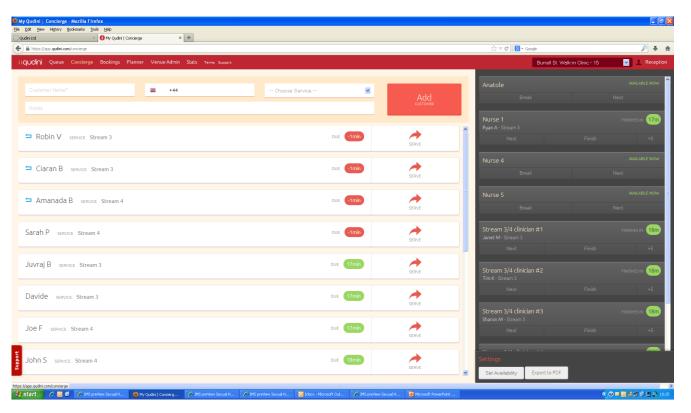


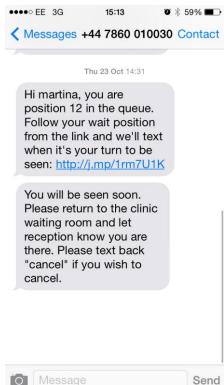
2	1	10%
3	1	10%
4	0	0%
5	0	0%
6	0	0%
7	2	20%
8	2	20%
9	1	10%
10	3	30%

Results II - Poor feedback

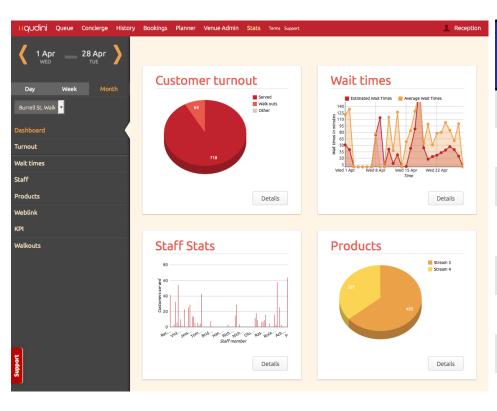
- "Waiting time was 1 hour 15 mins, a shorter wait time would be good"
- "I had to wait for over an hour for my appointment with a nurse which seems much too long. Appt was at 2.30 and I wasn't seen until 3.30"
- "Told wait would be 2 hours. Left and was advised to come back in 30 mins. I did and my appt was called 2 mins before I arrived and now I'm right at the back of the queue wait will now be 3-4 hours"

How the software works?



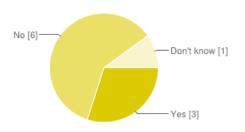


Qudini adoption over time



Month	Number served	Walk out
October	250	30
November	474	29
December	705	72
January 2015	874	53
February	571	58
March	537	80
April	718	64
Up to May 20th	691	61

Do you think the Qudini system has helped to reduce patient complaints?



Yes	3	30%
No	6	60%
Don't know	1	10%

Results III - Patient feedback

- Average four complaints a month before we used the queue management software
- One complaint re: waiting times in December and January respectively
- "The texting when you're up was great. Very caring and nice staff."
- "This clinic is very efficient. Love that I received a text stating what my # was in the queue. Thanks for a good experience"
- "The text messaging service is a really good idea. Many thanks"
- "Service is very helpful. Very impressed with the cleanliness and helpfulness of staff as well. Thank you"

Summary & discussion

- A queue management software has been introduced and embedded in the service
- There has been a reduction in complaints about waiting times
- Improved patient satisfaction as measured from positive comment cards
- Next steps for this tool:
 - Apply to other clinics
 - Patients to add themselves to the software

Acknowledgements



Any questions?