

Introduction

- Pediatric Rheumatology and Gastroenterology ambulatory care sites at a comprehensive medical center in New Jersey do not have an effective system to handle large volume of calls
- There are no standardized protocols in place for telephone triage/handling the high volume of calls
- Employee Feedback Survey showed that > 60% of employees were either slightly dissatisfied or extremely dissatisfied with routine scheduling of patients
- Patient Satisfaction/Press Ganey surveys showed dissatisfaction with:
 - phone encounter experience
 - appointment scheduling
- The department of Quality, Safety & Patient Experience is interested in improving the workflow of its ambulatory care sites who affected by the high-volume telephone calls

Objective

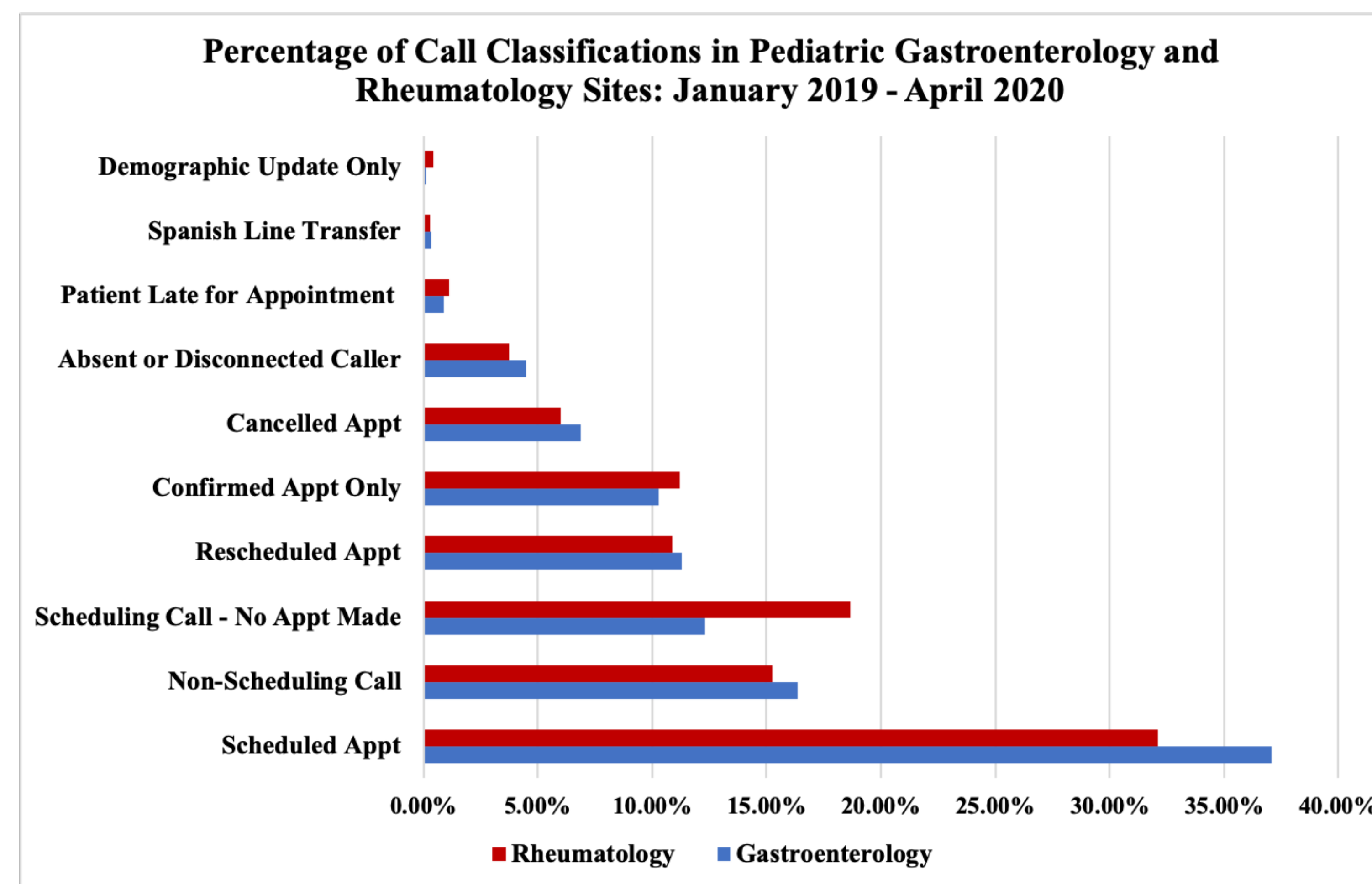
- To evaluate call data in order to make formal recommendations that will improve the workflow of Pediatric Rheumatology and Gastroenterology ambulatory care sites

Methods

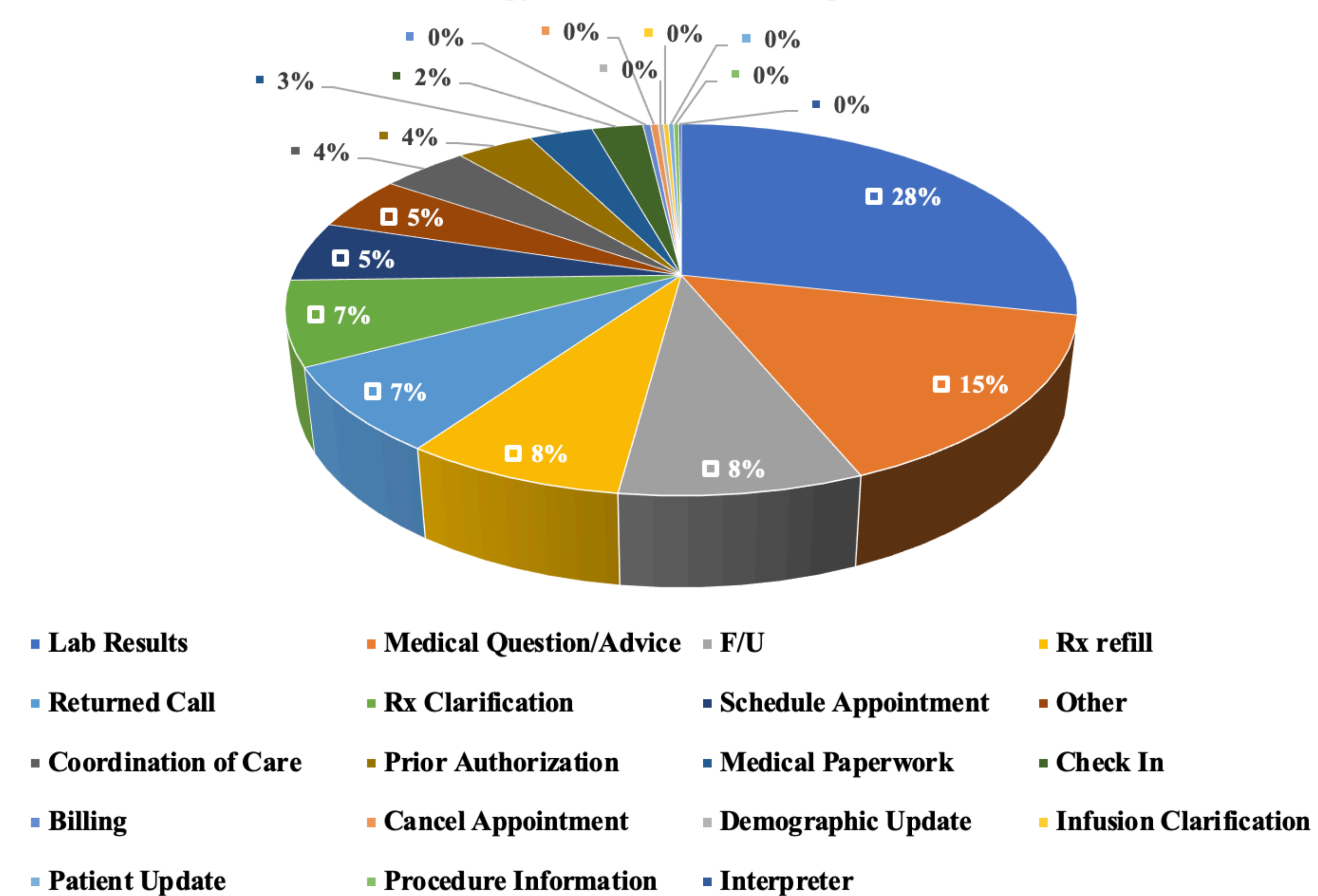
- Design & Setting: Secondary data analysis of Pediatric Gastroenterology and Rheumatology ambulatory care sites' telephone logs
- Interventions: Call log data from January 2019 - October 2020 was analyzed to identify the nature, duration, and patterns of telephone calls and formal practice recommendations were developed
- Outcomes measured:
 - Primary reason for calls
 - Call duration
 - Quality measures for customer service

Results: Pediatric Gastroenterology

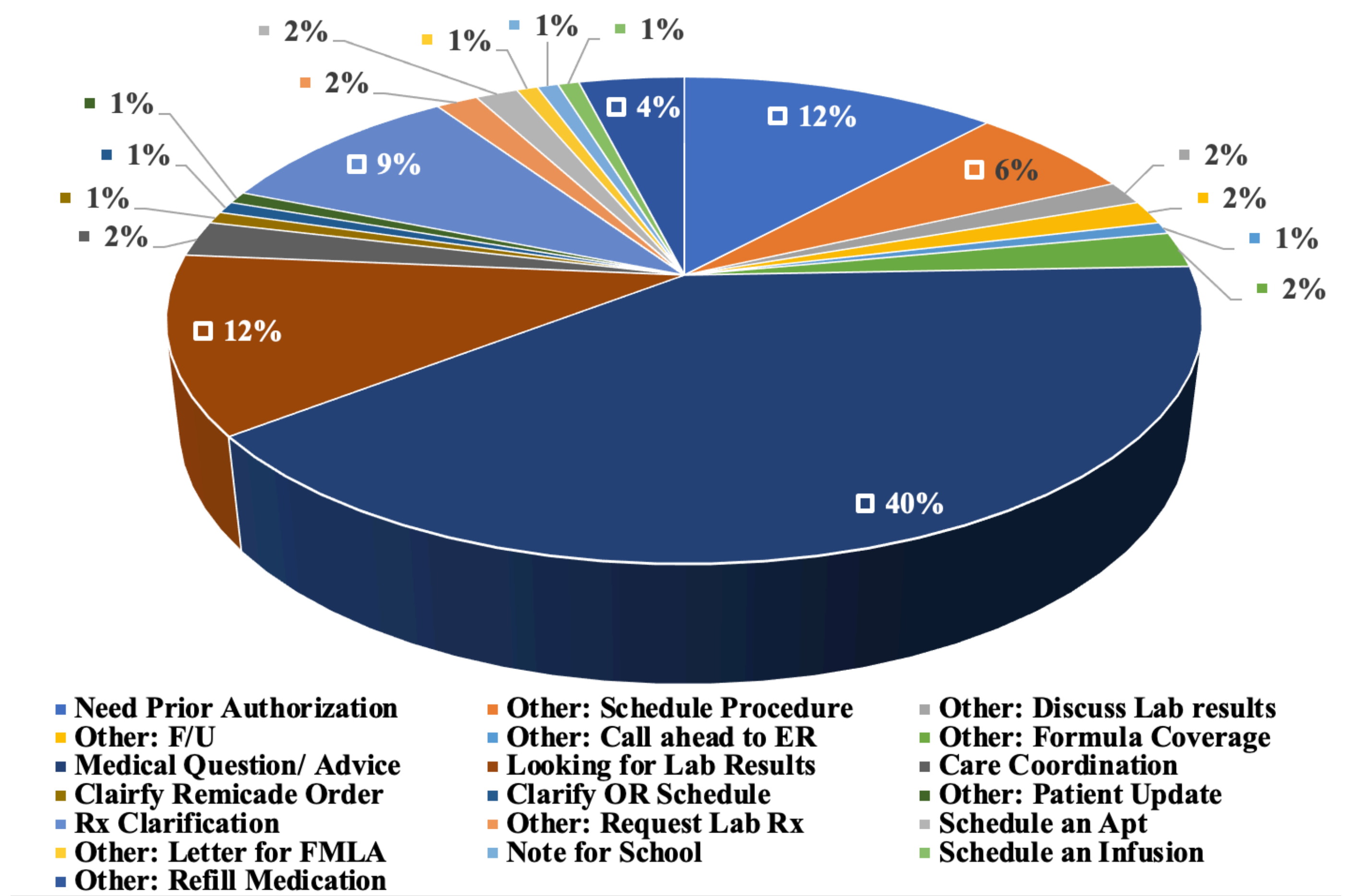
- January 2019 - April 2020: 10,510 calls
 - Primary reasons:
 - scheduling calls (>50%)
 - non-scheduling calls (15.72%)
 - confirming an existing appointment (11%)
 - rescheduling an existing appointment (11%)
 - cancel an existing appointment (6%)
- August 2020-September 2020: 128 calls
 - Primary Reasons:
 - medical advice (40%)
 - lab results (12%)
 - prior authorizations (12%)
 - medication clarification (9%)
 - medication refill (4%)
 - Most time consuming:
 - status of a medical order (\bar{x} =10 min)
 - prior authorization (\bar{x} =8.64 min)
 - scheduling a procedure (\bar{x} = 6.5 min)



Pediatric Rheumatology Call Trends: August 2020- October 2020



Pediatric Gastroenterology and Nutrition Call Trends: August 2020- September 2020



Results: Pediatric Rheumatology

- January 2019 - April 2020: 2,115 calls
 - Primary reasons:
 - scheduling calls (\approx 50%)
 - non-scheduling calls (17%)
 - rescheduling an existing appointment (11%)
 - confirming an existing appointment (10%)
 - cancel existing appointment (7%)
- September 2020 through August 2020: 805
 - Primary Reasons:
 - lab results (28%)
 - medical questions (15%)
 - follow up calls post treatment (8%)
 - medication refill (8%)
 - Most time consuming:
 - patient demographic updates (\bar{x} = 3.5 min)
 - prior authorization (\bar{x} = 3.3 min)
 - scheduling an appointment (\bar{x} = 3.26 min)
 - lab results (\bar{x} = 3.1 min)

Formal Recommendations

- Scheduling Application or Software, such as Doctor Direct
- Prior Authorization System(use of patient navigators, electronic PA, real time decision supports, and pharmacist led PA)
- Online patient portal system, such as OpenNotes
- Clinical decision support (CDS), such as ExpertRN

Plans for Future Scholarship

- Implementation of the proposed formal recommendations will be executed by upcoming Rutgers DNP students, as a major goal of this project was to facilitate legacy continuation within Rutgers School of Nursing.

Conclusion

- The Pediatric Rheumatology and Gastroenterology ambulatory care sites call patterns were assessed:
- during the period of operation of a virtual call center
- after use of virtual call center concluded, with nurses handling all incoming calls.
- Results \rightarrow patient common inquiries/ complaints
- Findings support the need for:
 - standardized protocol(s)
 - implementation of a patient centered systems solutions
- Implementation of recommendations can enhance the experiences of both patients and the members of the health care team

References

