

A doctor in a white lab coat stands with their arms crossed. They are holding a red stethoscope in their right hand, which is resting on their chest. The background is a soft, out-of-focus light blue.

# **+ Healthy Co**

## **Preliminary Insights & Selected Best Practices**

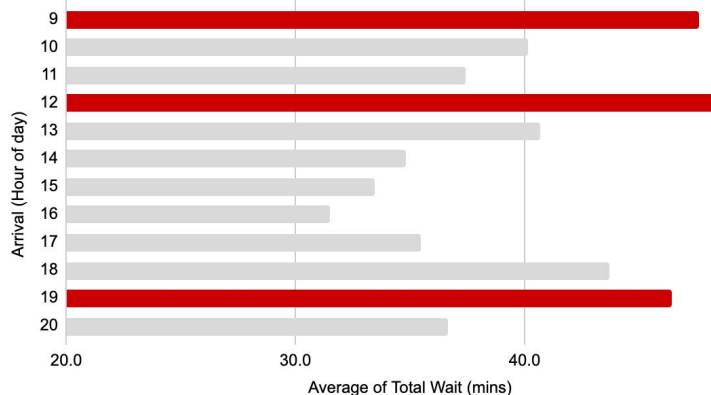
# Executive summary

- Preliminary analysis of 5K Healthy Co records show **time of arrival** and **healthcare professional** have an impact on total time spent at the facility
  - Average total wait time for all visits is approx. 40 minutes; **longer average waiting times observed around peak hours** (47.6, 48.3, and 46.4 minutes at 9, 12, 19 GMT respectively)
  - **Wait and visit times vary by Doctor**; patients waiting significantly longer to be seen by one specific Doctor vs. the rest (29.6 minutes vs. 21.7 minutes avg. of others)
- Best practices to improve the overall patient experience include improving the **condition of the waiting area** and **implementing queueing software**
  - The condition of the wait area is the **most important factor** in determining whether patients want to return, and likely one of the easiest to improve
  - Scheduling software (e.g., QLess) allows patients to queue from anywhere, **increasing patient satisfaction by 20%** in recent case study
- Planned next steps include a **brainstorming session** to develop long list of patient experience improvement initiatives

# Visit durations are heavily influenced by arrival time and vary significantly across care professionals



Average wait time for all visits is approx. 40 minutes; longer average waiting times observed around peak hours



9am, 12pm, and 7pm are the worst, with total wait of 47.6, 48.3, and 46.4 minutes respectively (well above 40 min avg.). Opportunity to optimize staff scheduling and/or consider capacity needs relative to demand.

Wait and visit times vary by Doctor (also observed with vitals nurses, not shown)

Doctor	P-V Wait	Visit: Grp 1	Visit: Grp 2	Visit: Grp 3
Balla	29.6	14.2	6.8	5.4
Campbell	21.8	10.4	6.9	5.3
Campos	21.4	10.0	6.9	5.3
Jankowski	21.8	10.9	6.7	5.3
Yung	21.6	10.5	6.7	5.4
Average	23.3	11.2	6.8	5.3

Patients that see Dr. Balla have a significantly higher post-vital wait than patients seen by others. Dr. Balla also spends significantly longer with Group 1 patients. Opportunity to scale best practices and incentivize improved behaviors.

# Best practices include improving wait area condition and implementing software to uplevel experience

The condition of the wait area is the most important factor in determining whether patients want to return

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% of patients who say X would cause them not to return to a specific provider:

Unpleasant waiting area



29%

Long wait time



11%

Patients who found the waiting room unpleasant were also **4X more likely to be dissatisfied** with their overall experience (Qualtrics Healthcare Pain Index)

We expect that improving the wait area condition to be **quick and relatively inexpensive** to accomplish (to be further explored).

Source: <https://qless.com/queue-management-for-hospitals-healthcare/>

Scheduling software (e.g., QLess) allows patients to queue from anywhere, increasing patient satisfaction

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- Software such as QLess allows patients to check in via text, apps, website, in-person kiosks, etc.
- Sophisticated algorithms deliver **accurate wait estimates**; patients receive **notifications** to smoothen wait experience
- Leads to lower **perception of wait times** and increases **overall patient experience**

*"With QLess we had a **20% increase in patient satisfaction** attributed to shorter wait times. We have fundamentally changed how we deliver care."*

**CEO, Healthcare Organization**

**Early signals are promising**, but we will validate whether similar solutions can have improve the patient experience at Healthy Co.

# Next steps

## Planned:

- Brainstorm session to develop a long list of patient experience improvement initiatives

## Recommended:

- Prepare & conduct patient experience survey with Healthy Co patients
- Understand current initiatives to improve provider performance
  - E.g., what is currently being done with the data?
- Hold early conversations with software vendors to better understand offering

# Annotated version

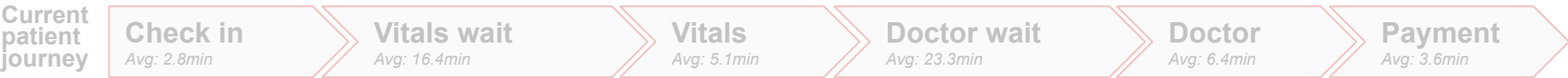
# Executive summary

**ANSWER:** Simple lay-out which captures all of the main points throughout the deck; selective bolding to help reader pick out key messages; limited but useful data points

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  - Average total wait time for all visits is approx. 40 minutes; **longer average waiting times observed around peak hours** (47.6, 48.3, and 46.4 minutes at 9, 12, 19 GMT respectively)
  - **Wait and visit times vary by Doctor**; patients waiting significantly longer to be seen by one specific Doctor vs. the rest (29.6 minutes vs. 21.7 minutes avg. of others)
- Best practices to improve the overall patient experience include improving the **condition of the waiting area** and **implementing queueing software**
  - The condition of the wait area is the **most important factor** in determining whether patients want to return, and likely one of the easiest to improve
  - Scheduling software (e.g. QLess) allows patients to queue from anywhere, **increasing patient satisfaction 20%** in recent case study
- Planned next steps include a **brainstorm session** to develop long-list of patient experience improvement initiatives

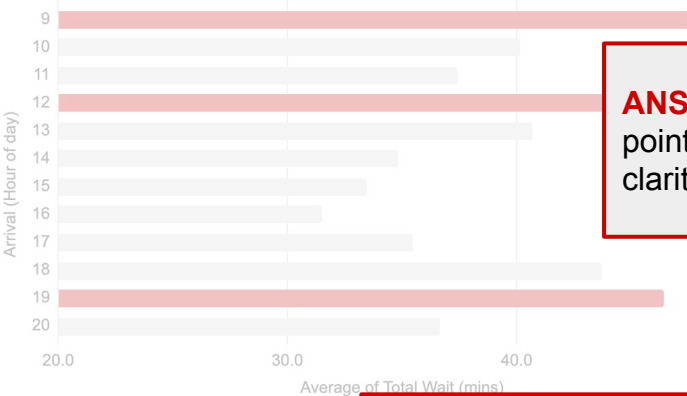
# Visit durations are heavily influenced by a and vary significantly across care profess

**ANSWER:** Title and subtitles capture key messages



Average wait time for all visits is approx. 40 minutes; longer average waiting times observed around peak hours

Wait and visit times vary by Doctor (also observed with vitals nurses, not shown)



**ANSWER:** Key data points highlighted for clarity

Doctor	P-V Wait	Visit: Grp 1	Visit: Grp 2	Visit: Grp 3
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	21.8	10.4	6.9	5.3
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Average	23.3	11.2	6.8	5.3

9am, 12pm, and 7pm are the worst, with wait times above 40 minutes respectively (well above 40 minutes). Opportunity to scale best practices and incentivize staff scheduling and/or consider capacity.

**ANSWER:** Judgment exercised to show what was considered to be the top 3 points (arrival hour, doctor wait, doctor visit time)

Dr. Balla have a significantly higher post-vital wait than others. Dr. Balla also spends significantly longer with patients. Opportunity to scale best practices and incentivize staff scheduling and/or consider capacity.



# Best practices include improving wait area condition and implementing software to uplevel experience

The condition of the wait area is the most important factor in determining whether patients want to return

% of patients who say X would cause them not to return to a specific provider:

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We expect that improving the wait area will be **quick and relatively inexpensive** (to be further explored).

Source: <https://qless.com/queue-management-for-hospitals-healthcare/>

Scheduling software (e.g. QLess) allows patients to queue from anywhere, increasing patient satisfaction

- Software such as QLess allows patients to check in via text, apps, website, in-person kiosks, etc.

**ANSWER:** Information (incl. Quotes and stats) pulled from Research summary, source noted in bottom left corner

ns deliver **accurate wait** receive **notifications** to smoothen  
tion of wait times and  
increases **overall patient experience**

*"With QLess we had a **20% increase in patient satisfaction** attributed to shorter wait times. We have fundamentally changed how we deliver care."*

**CEO, Healthcare Organization**

**ANSWER:** The "so-what" included at the bottom, e.g. why is this important / what can we do about it

re **promising**, but we will validate solutions can have improve the nce at Healthy Co.

# Next steps

**ANSWER:** Simple wording, easy to read, bullet points

## Planned:

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