Clinic Utilisation Report

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Contents

A comparison across clinics and between pilgrim and peripheral sites

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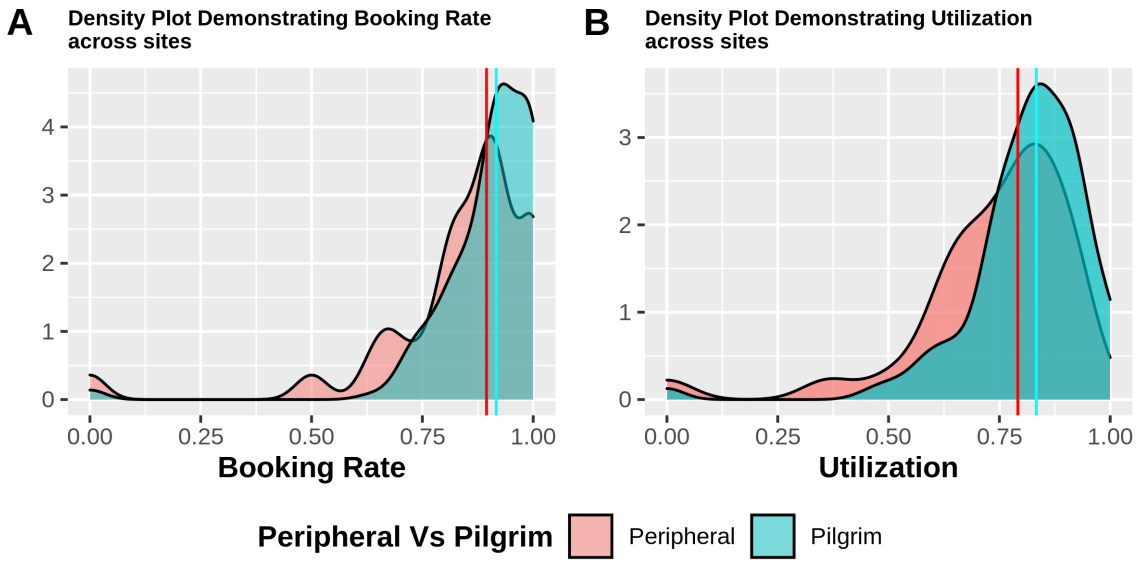
The aim of this project is to audit our use of general surgery and colorectal surgery clinics. We acquired our clinic attendance data from hospital information services. We further analysed this data to assess our utilization and DNAs. These are the clinic codes use for the purpose of this analysis **JH-MIRO2, JH-ZAIO4, PH-ATE35, PH-ATEPF, PH-GOR52, PH-MIR41, PH-MIRPF, PH-MMC35, PH-MOB21, PH-MOB40, PH-RTH11, PH-RTH45, PH-ZAI50, SD-MMCSD, SD-ATESD**

1.The Data

With a preliminary view we can see that our Pilgrim Median Booking Rate:91.7% is marginally higher than our Peripheral Median Booking Rate:89.5%. Difference in median was found to be statistically significant at p-value of *0.023*(Graph 1.1A). Similarly our Pilgrim Median Utilizaton Rate:83.3% is marginally higher than our Peripheral Median Utilization Rate:79.2%. Difference in median was found to be statistically significant at p-value of *0.011*(Graph 1.1B)

Graph 1.1

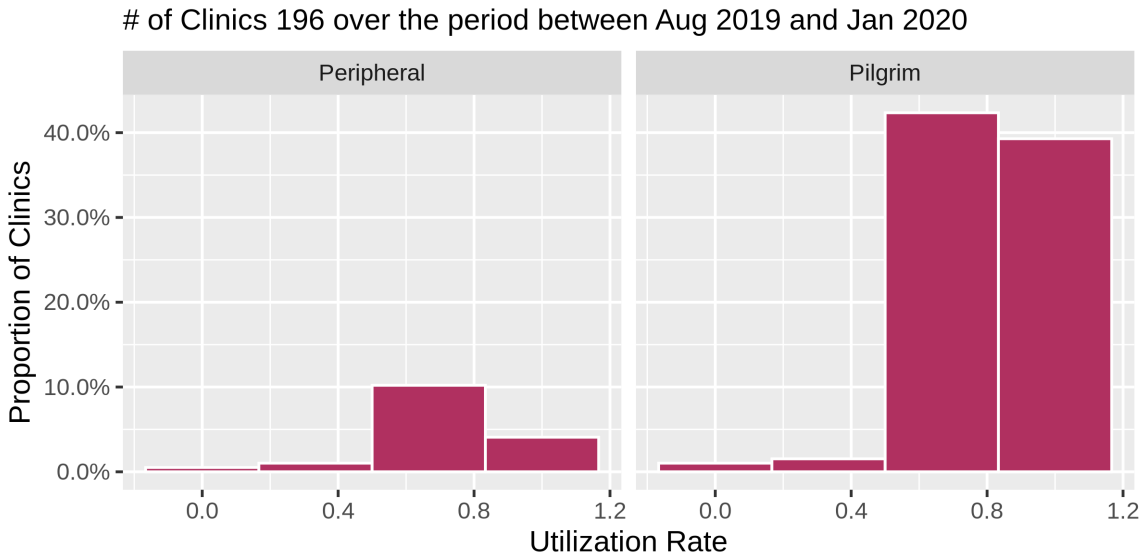


M	OneVsTwo	count	Site
Aug	One Man	4	Peripheral
Aug	One Man	18	Pilgrim
Sep	One Man	5	Peripheral
Sep	One Man	13	Pilgrim
Oct	One Man	5	Peripheral
Oct	One Man	21	Pilgrim
Nov	One Man	6	Peripheral
Nov	One Man	22	Pilgrim
Dec	One Man	7	Peripheral
Dec	One Man	14	Pilgrim
Jan	One Man	4	Peripheral
Jan	One Man	18	Pilgrim

M	OneVsTwo	count	Site
Aug	Two Man	9	Pilgrim
Sep	Two Man	9	Pilgrim
Oct	Two Man	13	Pilgrim
Nov	Two Man	8	Pilgrim
Dec	Two Man	9	Pilgrim
Jan	Two Man	11	Pilgrim

Table-1: Total number of One and Two Man Clinics Per Month for Pilgrim and Peripheral Sites

Graph-1.2 Histogram demonstrating the distribution of Clinic Utilizatation Rates



2.Further Breakdown

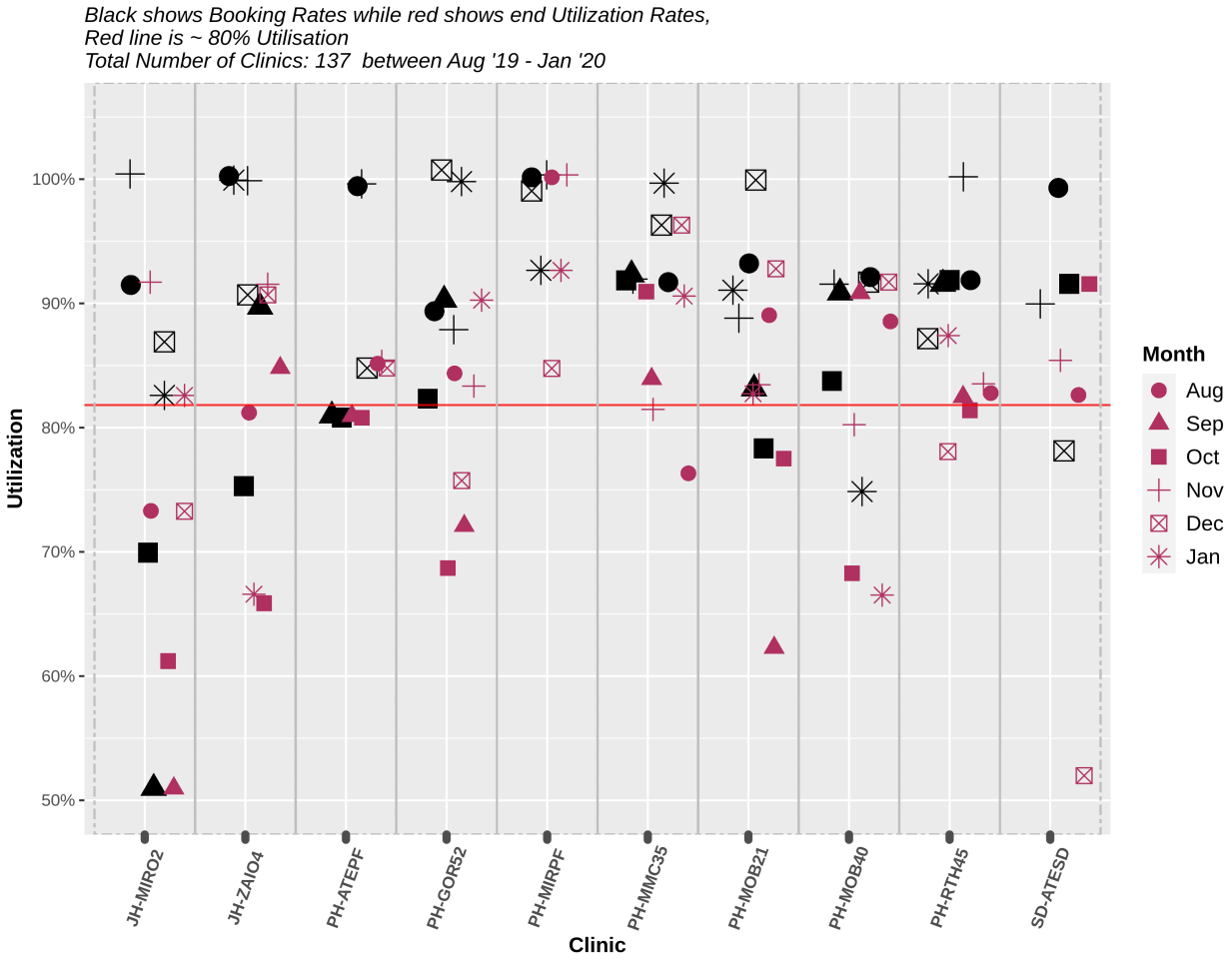
The following graphs demonstrate per clinic data. **Black Shapes** demonstrate booking rate while **Red Shapes** demonstrate utilization rates. These are monthly rates ie the actual figure is an average of clinics used per month. **Booking rate** is

$$\frac{initial\ bookedslots}{total\ available\ slots}$$

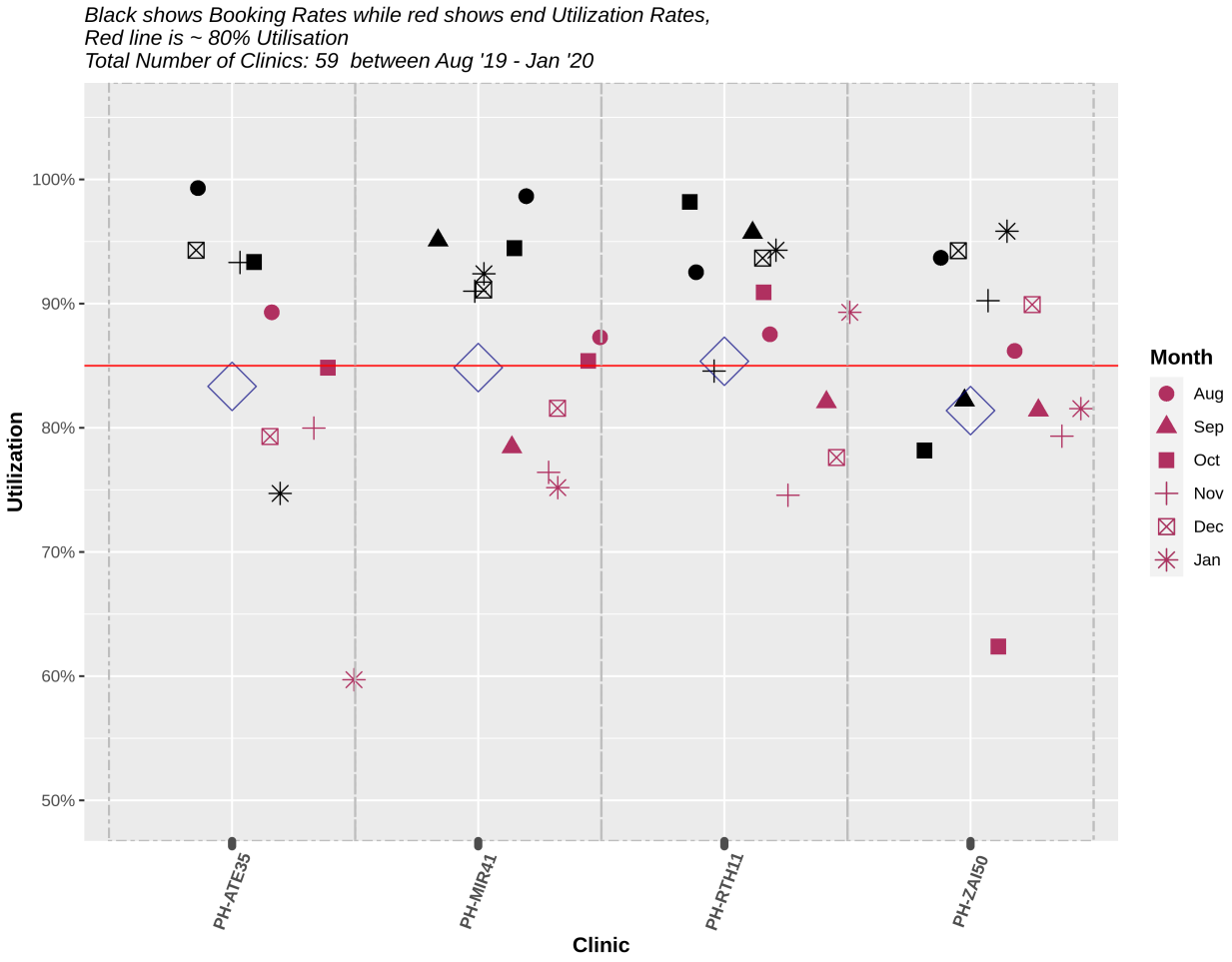
while **Utilization Rate** is

$$\frac{attended\ clinic\ slots}{booked\ slots}$$

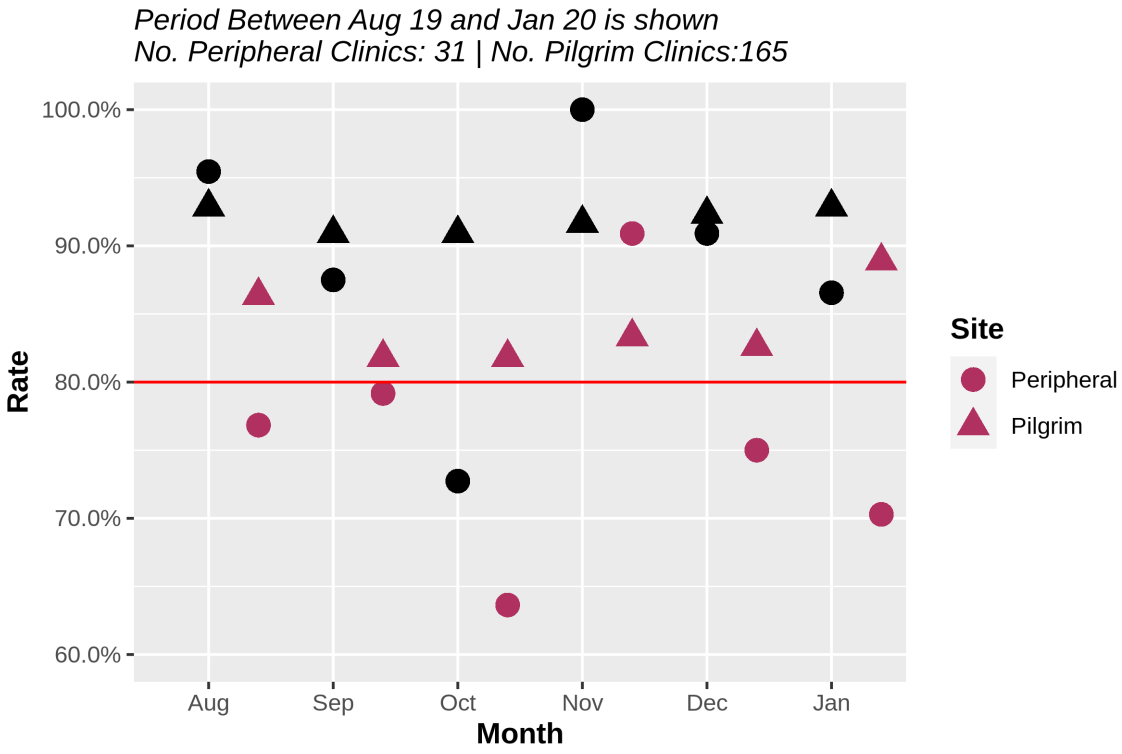
Graph-2.1 Booking and Utilization rate per month for One Man clinics



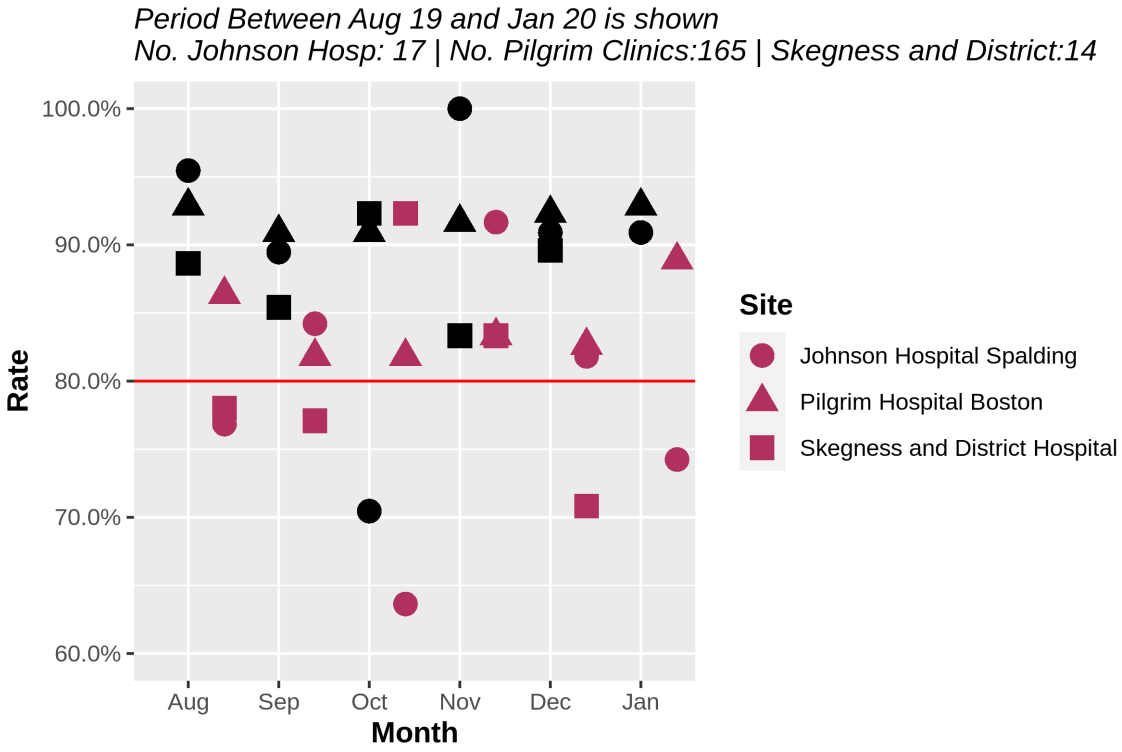
Graph-2.2 Booking and Utilization Rates per month for Two Man clinics

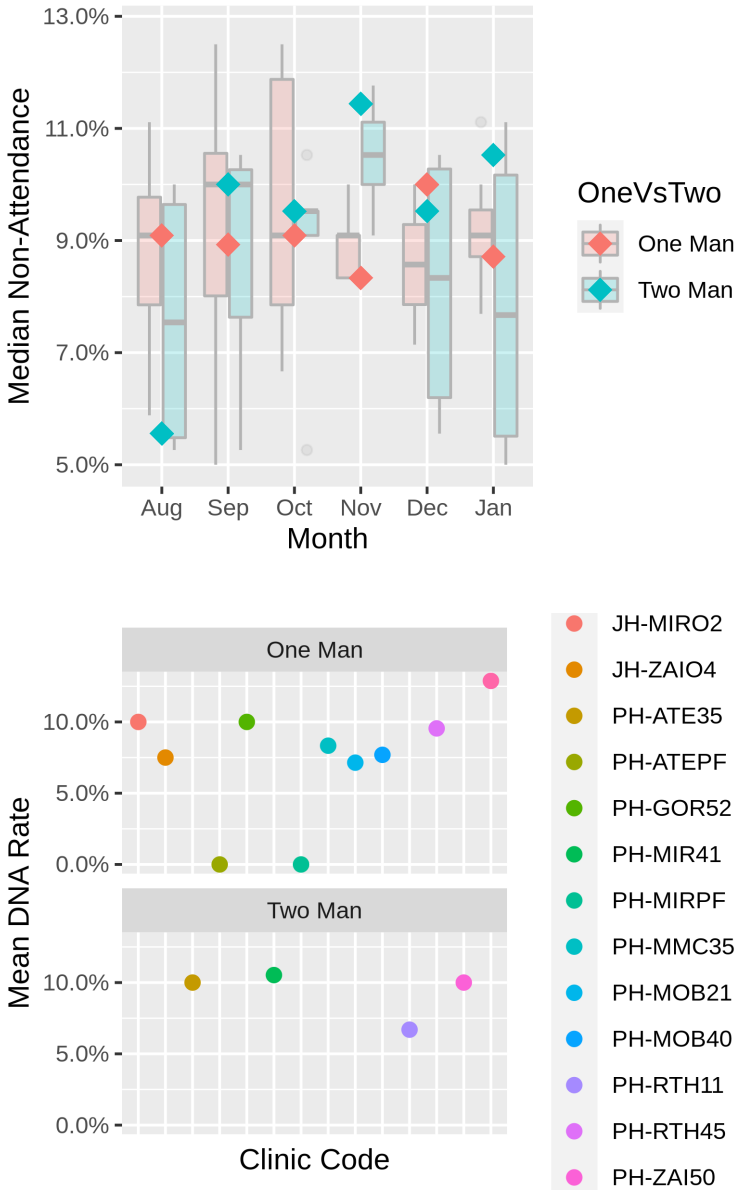


Graph-2.3 Utilization and Booking Rate per month across Peripheral vs Pilgrim clinics



Graph-2.4 Utilization and Booking Rate per month across Peripheral vs Pilgrim clinics





3.Discussion

Graph-2.4 & Graph-2.3 demonstrates again underutilized peripheral clinics clinics(p-value:0.011) despite having similar Booking Rates. This appears to be more during certain month. Again however due the small sample sizes it is not possible to perform adequate analysis.

Initially it seems that the differences although statistically significant were small. However when consulting the last 4 charts it seems evident that a notable number of our clinics were underbooked at 80% booking rate(which translates to 2 clinic slots for 1-man-clinics and about 3 clinic slots for 2-man-clinics). Although those numbers warrant attention their statistical significance is not easily demonstrated due to the small sample sizes(As shown on Table 1.1). If we were to assume their significance the next question we need to answer is *why?*.

On further discussion with staff responsible for clinic booking we now think most deficits in booking rates is due to patient calling in 1 or 2 days before and cancelling. A patient would be considered as DNA only if he/she was still recorded to come in on the day of the clinic but didn't.

We suggest one possible option is to over book clinics with 1 -2 patients from the next similar clinic and advising them that this is only a potential booking and that they will have a garaunteed booking ontop of that. That they should be ready to be called in 1-2 day's notice.

This should bring up the booking rate as well as show us a True DNA rate.

4.Recommendations

We suggest the following recommendations:

- -Create waiting list with prebooking patients on multiple clinics
- -Allocate Clinic Space by proximity
- -Monthly Review of Booking Rate
- -Improve Communication Between Staff accross sites
- -Disseminate This Report and following monthly Booking Rates to all concerned Staff