

Share & Learn: Helping patients to access care

Improving wait times on the phone

June 13, 2022



Land Acknowledgement

We acknowledge this land on which the University of Toronto operates. For thousands of years, it has been the traditional land of the Huron-Wendat, the Seneca, and most recently, the Mississaugas of the Credit River. Today, this meeting place is still the home to many Indigenous people from across Turtle Island and we are grateful to have the opportunity to work on this land.



Share & Learn: Helping patients to access care

Improving wait times on the phone

Presenters:

Southlake Regional Health Centre

- **Dr. Navsheer Gill**, Family Physician, Southlake Family Health Team, Newmarket, ON

Mount Sinai Hospital

- **Dr. Sakina Walji**, Family Physician, Mount Sinai Academic Family Health Team, Toronto, ON

Moderators:

Dr. Debbie Elman, Family Physician, Sunnybrook Health Sciences Centre & **Dr. Erica Li**, Family Physician, Michael Garron Hospital



Disclosures

Name: Dr. Navsheer Gill

- **Relationships with financial sponsors:** None
 - **Grants/Research Support:** N/A
 - **Speakers Bureau/Honoraria:** N/A
 - **Other:** N/A

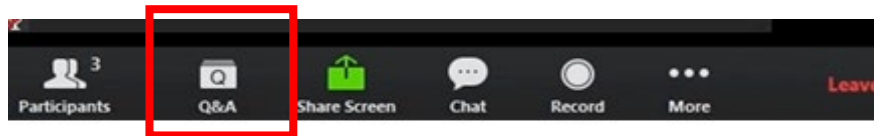
Name: Dr. Sakina Walji

- **Relationships with financial sponsors:** None
 - **Grants/Research Support:** N/A
 - **Speakers Bureau/Honoraria:** N/A
 - **Other:** N/A

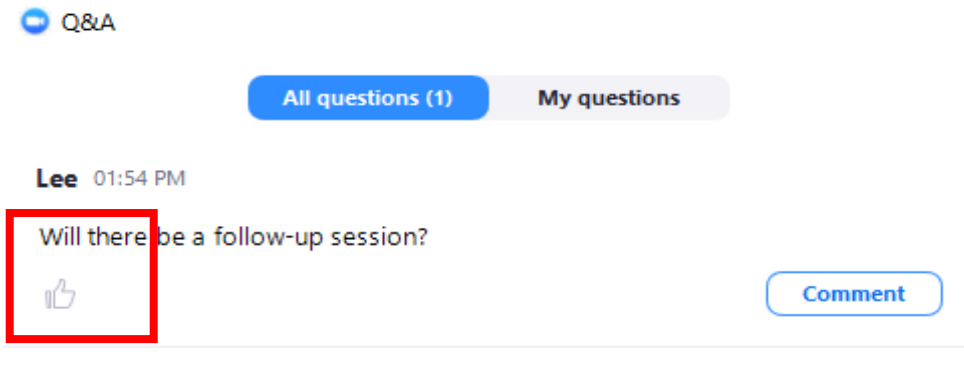


How to participate

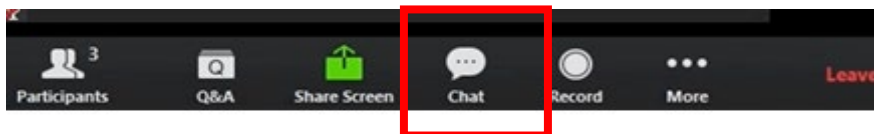
- All questions should be asked using the Q&A function at the bottom of your screen.



- Press the thumbs up button to upvote another guests questions. Upvote a question if you want to ask a similar question or want to see a guest's question go to the top and catch the panels attention.



- Please use the chat box for networking purposes only.



Reminder: this session is being recorded and will be available along with the slides at <https://dfcm.utoronto.ca/share-learn>

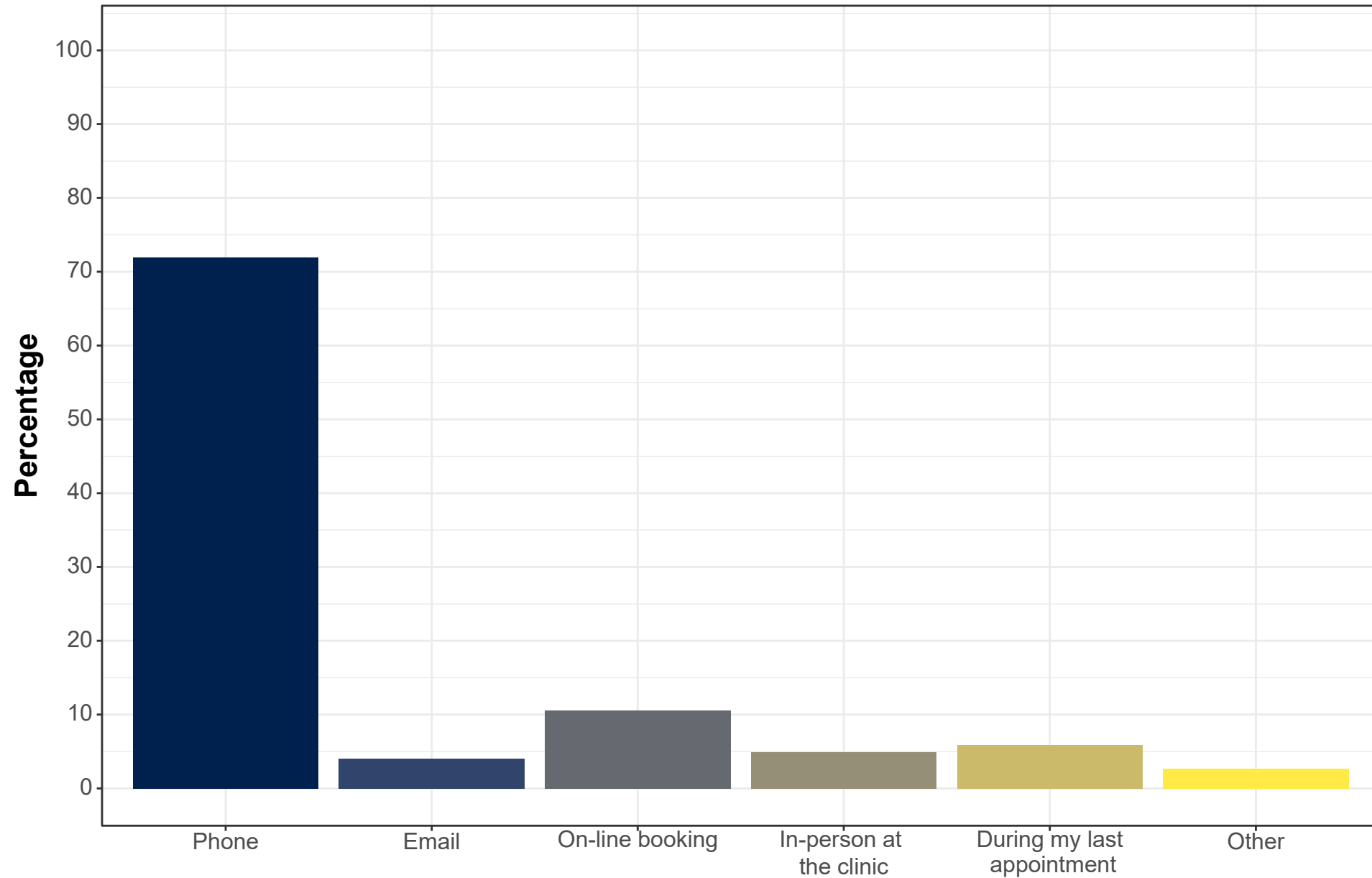
Background

- Common patient experience survey across DFCM
- Wave 5 surveys were sent between Nov 2021 and Feb 2022 at 13 of the core DFCM teaching sites
- Survey emailed to all patients with an email on file and a birthday in May, June, July, August, September, and October

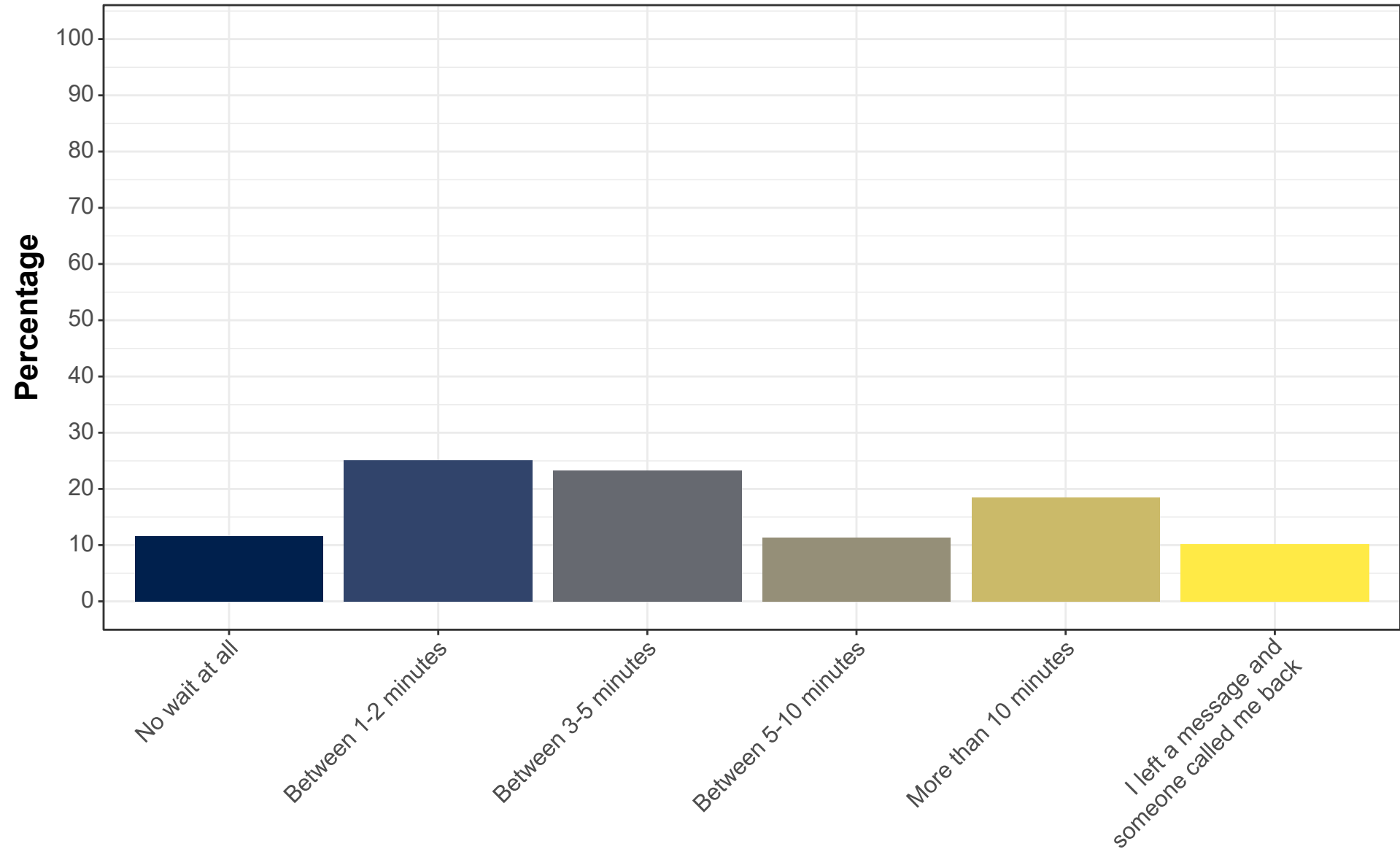


How did you book your most recent appointment? Note: Not all of these methods may be available at our practice.

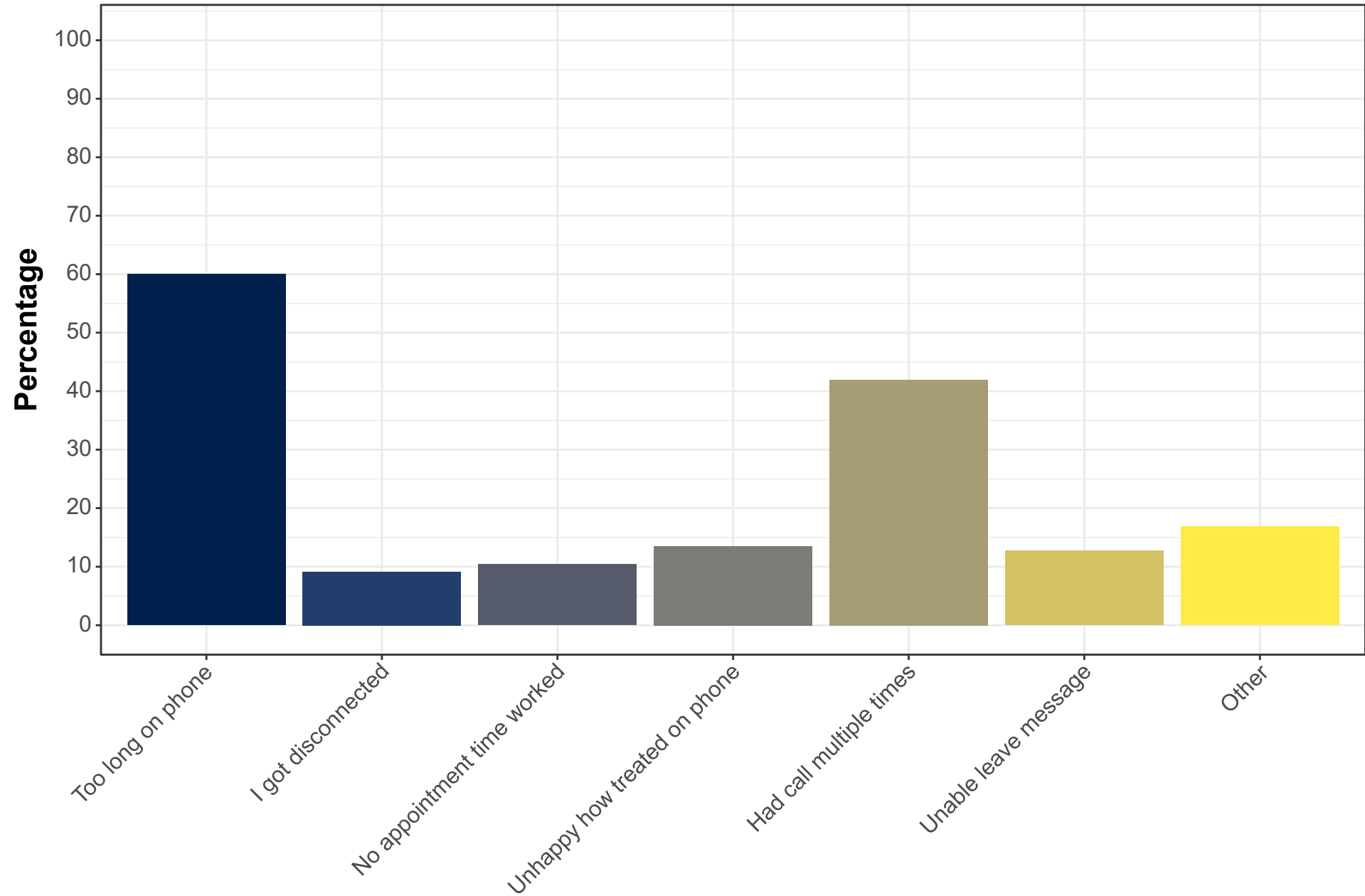
N=11960



When you called [CLINIC] to book your appointment by phone, how long did you wait before being able to speak to someone who could book your appointment?
N=8337



Why did you rate your last booking experience as fair or poor? N=1504



Share & Learn

- Shared improvement initiative presented by the QPC
- Exploring how different teams have approached improving wait times on the phone
 - What interventions have been tried? What happened? What can we learn?

Southlake Academic Family Health Team

- FHT/FHO
- Affiliated with Southlake Regional Health Centre
- 4 Sites
 - FMTU and Main Site - Newmarket
 - Satellites - Aurora, Bradford and Mount Albert
- ~ 25,000 patients
- 20 Physicians, 18 Residents, 20 IHPs, 20 Admins
- *Quality Improvement Infrastructure:*
 - Quality Improvement and Program Manager
 - Quality Improvement Lead Physician (Myself)
 - Quality Improvement Committee (quarterly meetings)



Family & Community Medicine
UNIVERSITY OF TORONTO



Newmarket Academic Site (Main)

- ~ 14,200 patients
- 43 Clinicians:
 - 11 Physicians
 - 18 residents
 - 14 IHPs
- 5 FHT Admin Staff
- 12 Administrators



Background

- October 2019: DFCM presentation highlighted improvements to call wait times in 2018-2019
- Some of the changes included:
 - Environmental scans comparing to other FHTs
 - Traffic study
 - Identifying bottlenecks with admin team and leadership team
 - Educating patients on peak hours to avoid call
 - Added admin staff during busy call centre times or when call centre has 4 or more patients waiting in the queue
 - Encouraged patients to register for online booking and communication via HealthMyself/Pomelo
- April 2021: implemented another strategy which we will discuss today

What Problem Were You Addressing?

- Patient Experience Survey → # 1 complaint from patients is Call Centre wait times
- Google reviews → also # 1 complaint from patients is Call Centre wait times



- Stressor for medical receptionists due to call volumes and patient frustration/dissatisfaction
- Stressor for clinicians when patients complain
- Stressor for pts - Interferes with patient access

“Frustrated that I need to wait on hold...”

*“..... **wait on the phone**. I have listened to the best times to call and tried every time and **still couldn't get through.**”*

“Waiting on the phone for long periods of time...”



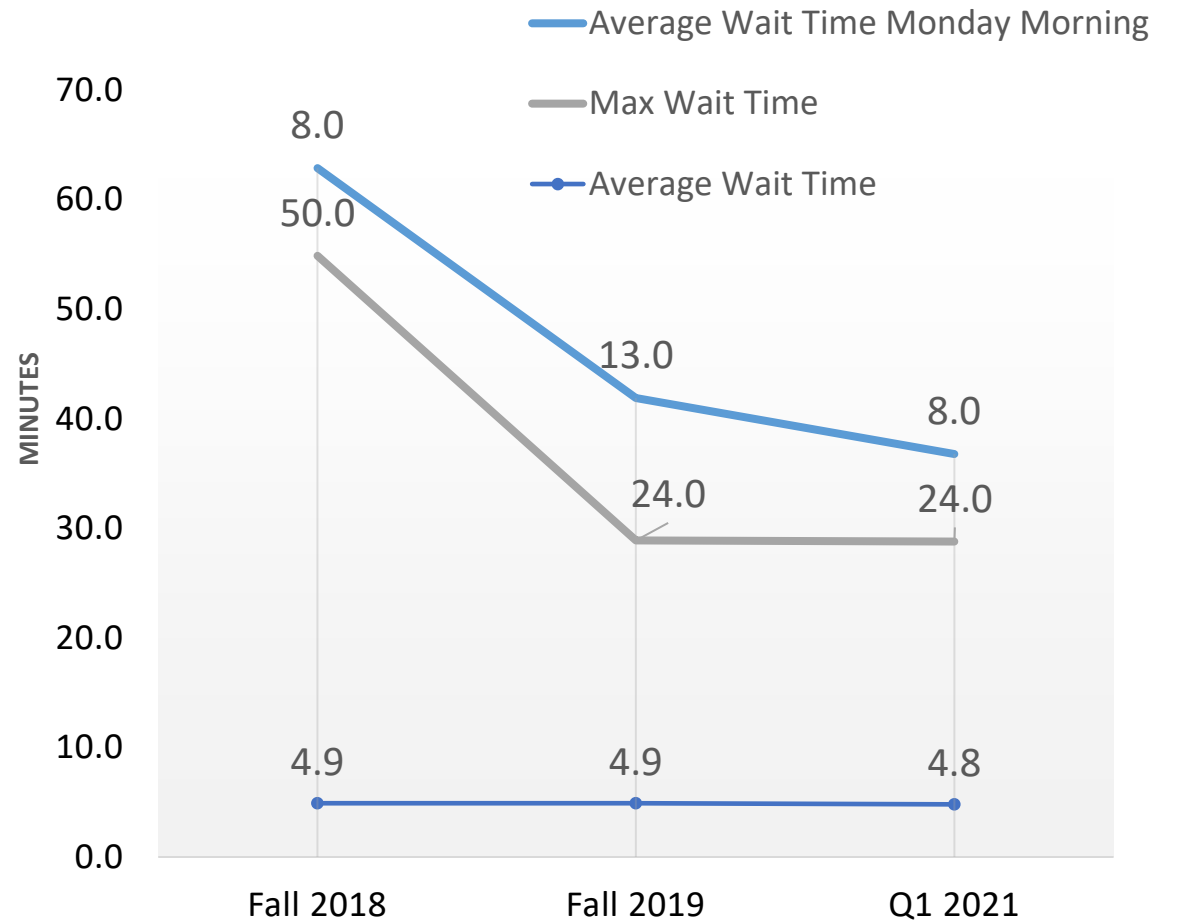
What Problem Were You Addressing?

- **PATIENT EXPERIENCE SURVEY RESULTS [FALL 2020]**
- *“If you avoided or delayed receiving care from our team, please tell us why you did not get care from Southlake Academic Family Health Team during the COVID pandemic”:*
 - ~ **8%** answered because they could not get through to the clinic on the phone
- *“What could our clinic have done differently to better meet patients’ needs?”*
 - ~ **70%** of patient comments related to the Call Centre (e.g. decrease wait times, less confusing phone prompts, decrease the hold periods)

What Problem Were You Addressing?

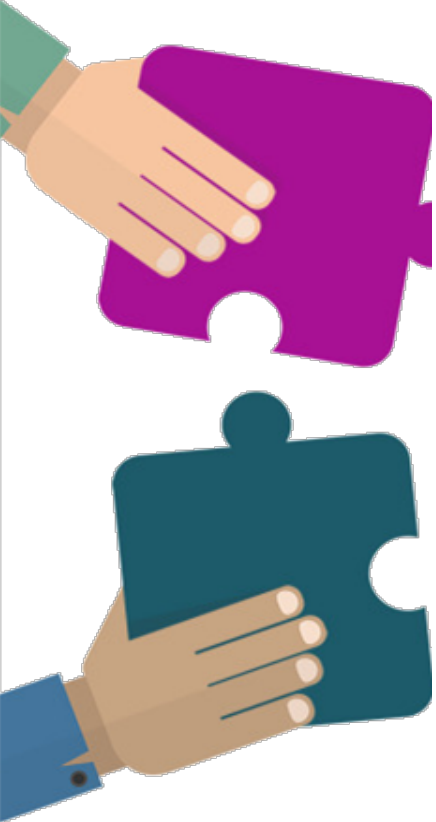
- MYSTERY SHOPPING [Q1 2021]** *Bell Canada Traffic Study

Summary	*Fall 2018	*Fall 2019	Q1 2021
Average Wait Time (min)	4.9	4.9	4.8
Max Wait Time (min)	50	24	24
Average Wait Time Monday Morning	8	13	8
% of Time Call Above 5 Minutes	55%	42%	33%
% Time Phone Line Busy	5%	4%	7%



What Changes Did You Try? #1

1. DIVISION OF CALL CENTRE – NORTH AND SOUTH PODS

- 
- An illustration on the left side of the slide shows two hands holding puzzle pieces. The top hand, wearing a green sleeve, holds a purple puzzle piece. The bottom hand, wearing a blue sleeve, holds a teal puzzle piece. The pieces are interlocking, symbolizing the division of tasks or the integration of different parts of a system.
- Admin having to remember multiple booking processes for many clinicians
 - 11 physicians, 18 resident physicians, Nursing staff and other IHPs
 - Other miscellaneous calls (e.g. COVID-19, vaccines, etc.,)
 - Now 50% of calls diverted to one call admin (North Pod) and the other 50% to the other call admin (South Pod)
 - Less booking processes to remember per call admin
 - Less time with patients on the phone, less time patients are on hold in call queue



What Changes Did You Try? #2

2. UPDATED PHONE TREE (CALL OPTIONS)

- Patients just pressed “zero” for **everything** even though there were appropriate options in place → more call volumes
- No more option “zero”
 - Patient must listen to the phone prompts
- Created options for frequently asked inquires instead of patients pressing “zero” and being placed in Call Centre queue.



- Script renewal requests instructions (recording)
- COVID/Flu/Student Vaccines (recording)
- IHP Bookings (transfer to IHP admin)
- Questions for nurses (transfer to nurses)
- Referrals (transfer to referral admin)
- Cancellation line for appointments (transfer to voicemail box)



What Changes Did You Try? #3

3. EDUCATION

- PCPs to inform patients on form completion timeframe at time of encounter
- All to educate patients on prescription renewals
- All to encourage patients to register for online booking platform
- Encourage non-urgent booking messages/questions through online platform
 - Correctly booked appointment online can reduce admin work by 83%
- Improve quality of call admin by providing longer training in the Call Centre
- Tip sheet on what information is required from patients when taking a message
- Scheduled refresher for Call Centre agents/admin training every 6 months
- Review regularly occurring errors with all staff members monthly

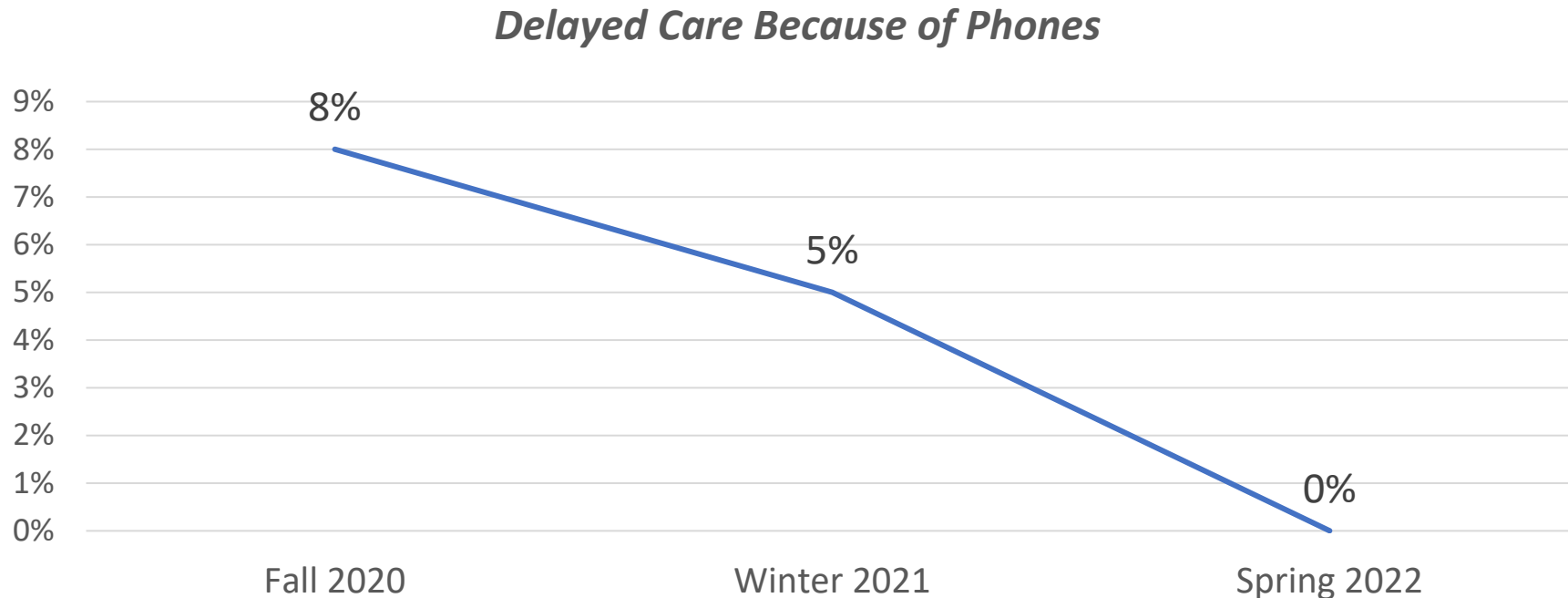


What Happened?

PATIENT EXPERIENCE SURVEY RESULTS [WINTER 2021 & SPRING 2022]

- *“If you avoided or delayed receiving care from our team, please tell us why you did not get care from Southlake Academic Family Health Team during the COVID pandemic”*

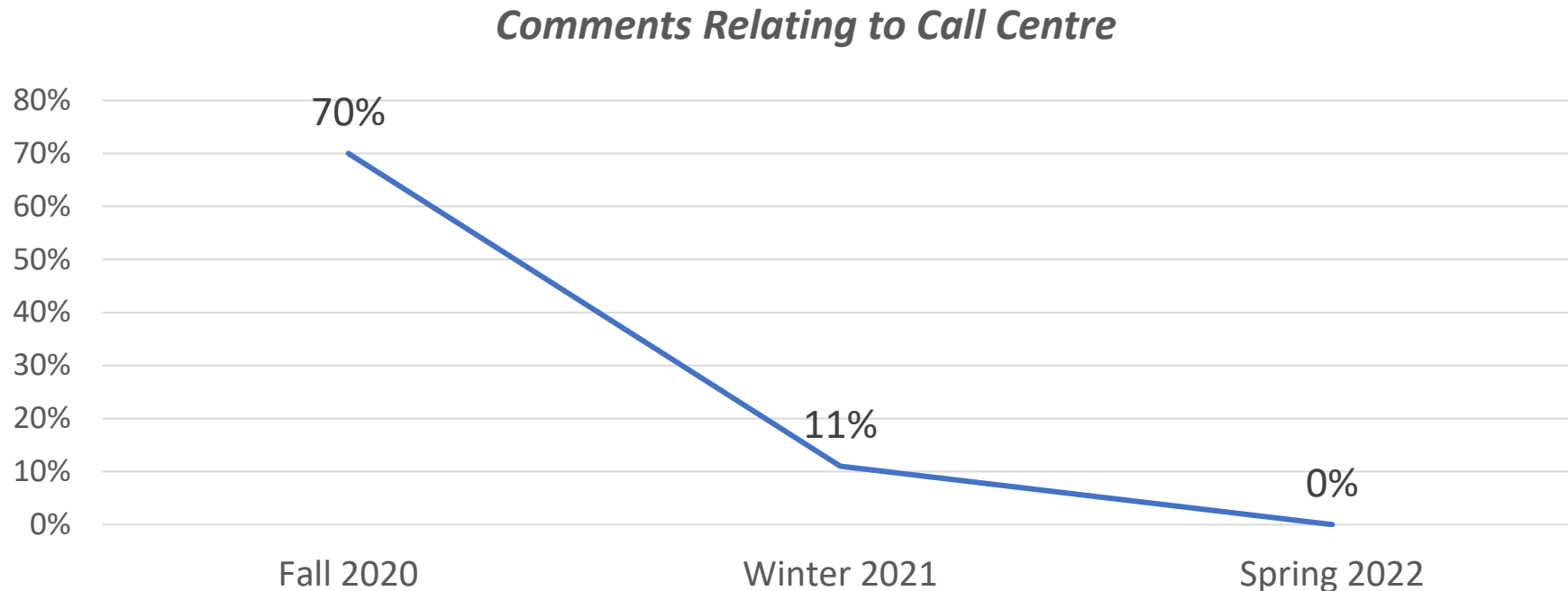
Respondents who answered because they could not get through to the clinic on the phone



What Happened?

PATIENT EXPERIENCE SURVEY RESULTS [WINTER 2021 & SPRING 2022]

- “ Patient **comments** on what our clinic could have done differently to better meet patients’ health needs was relating to the Call Centre (such as decrease long wait times, less confusing phone prompts, decrease the hold periods, etc.,) “



What Happened?

Major
staffing
crisis



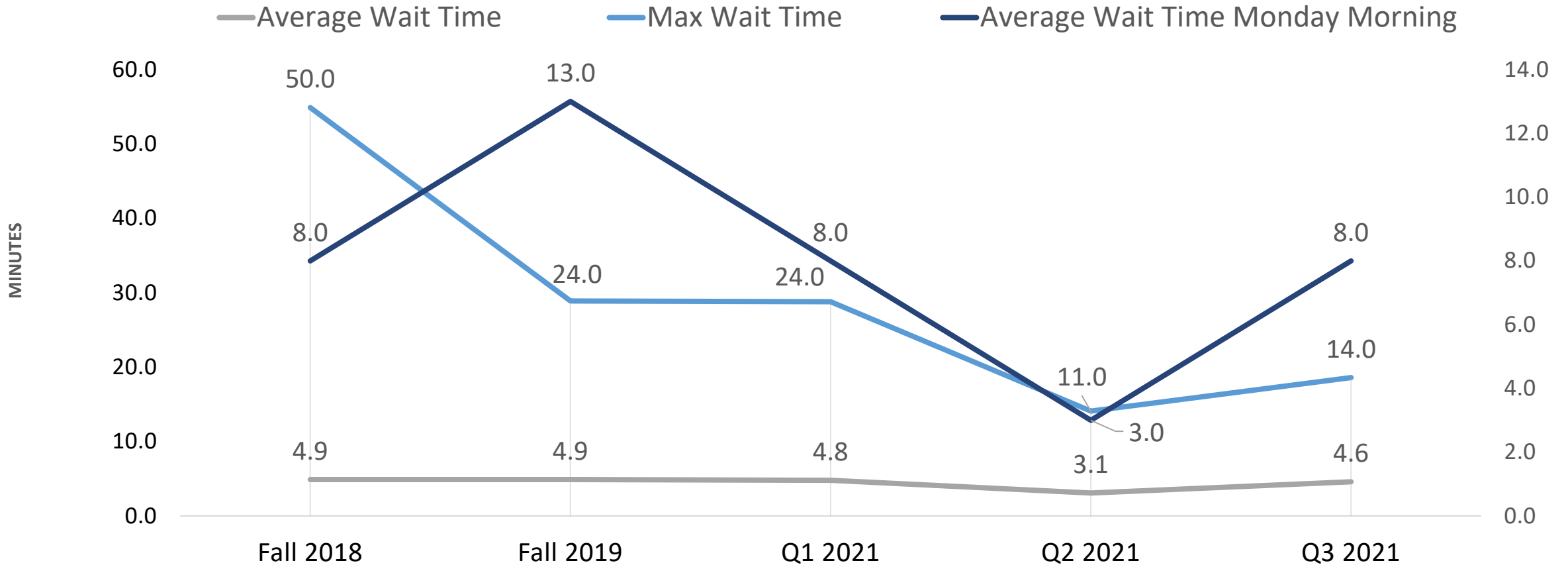
MYSTERY SHOPPING [Q2 & Q3 2021] *Bell Canada Traffic Study

Summary	*Fall 2018	*Fall 2019	Q1 2021	Q2 2021	Q3 2021
Average Wait Time (min)	4.9	4.9	4.8	3.1	4.6
Max Wait Time (min)	50	24	24	11	14
Average Wait Time Monday Morning	8	13	8	3	8
% of Time Call Above 5 Minutes	55%	42%	33%	19%	38%
% Time Phone Line Busy	5%	4%	7%	7%	17%

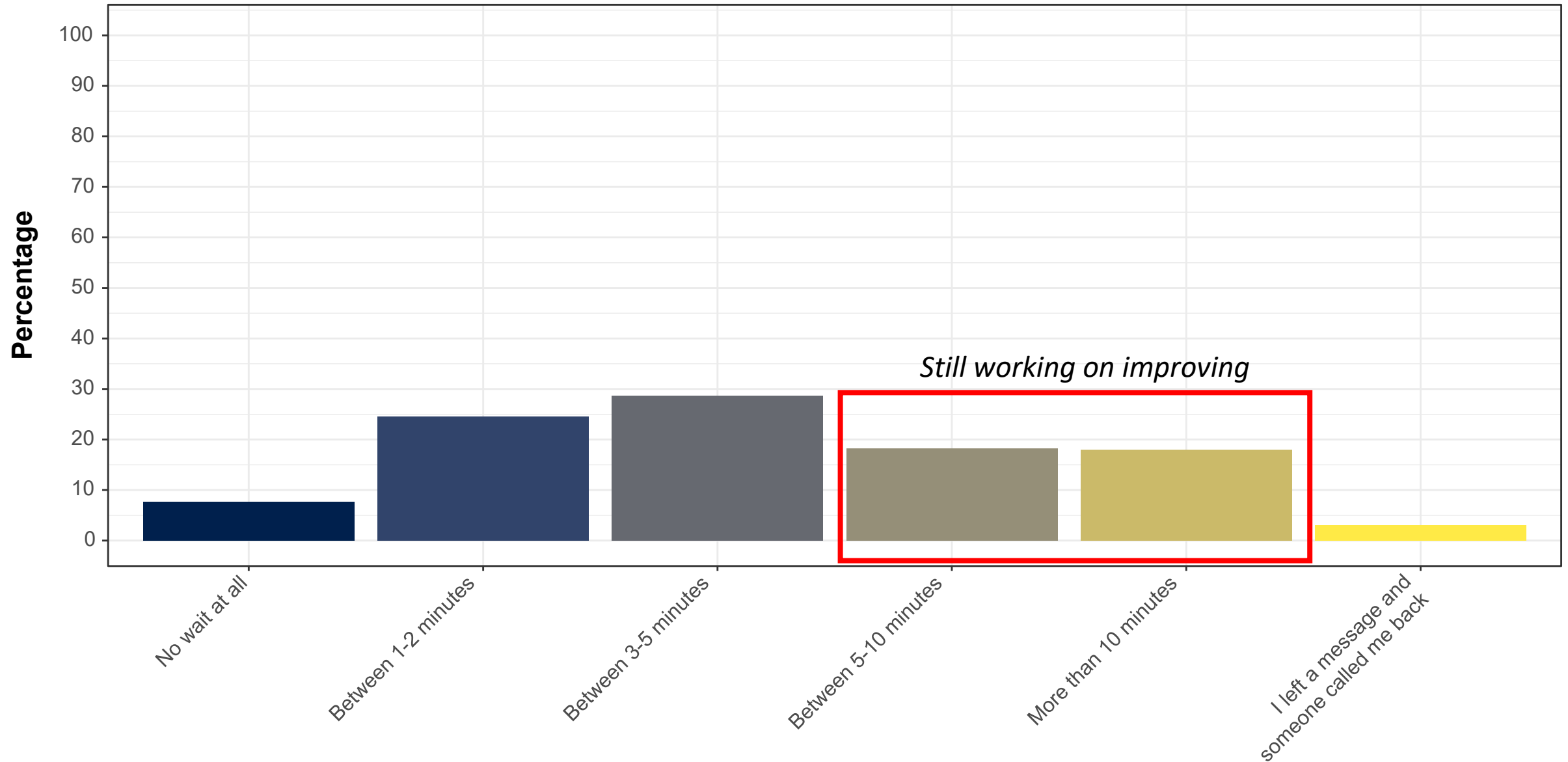


What Happened?

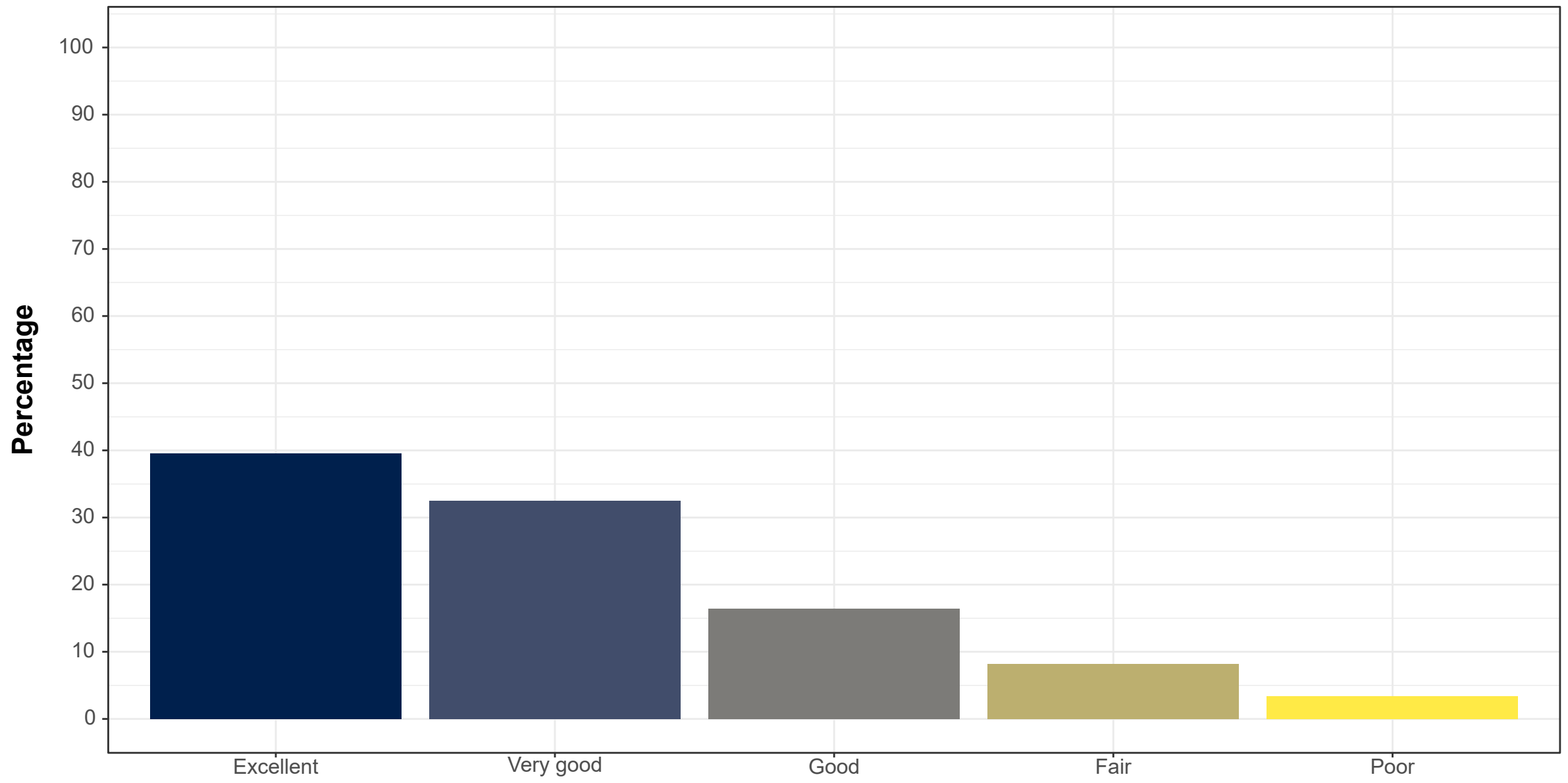
MYSTERY SHOPPING [Q2 & Q3 2021]



**When you called SAFHT to book your appointment by phone, how long did you wait before being able to speak to someone who could book your appointment?
N=440**



How would you rate your overall experience when booking your last appointment over the phone?
N=440



What Will You Be Doing Next?

- Complete more frequent rounds of Mystery Shopping
 - Peak in Q3 because of COVID-19 booster calls, flu calls, etc.,?
- Continue to monitor Call Centre
- Continue to distribute PES to monitor responses relating to Call Centre
- More training to existing staff
- Obtain feedback from admin team, clinicians and patients
 - Call agents reported an increase in satisfaction and less frustrations
 - Clinicians reported an increase in dissatisfaction as there was an increase in EMR messages relating to booking inquiries

What Did You Learn in the Process?

- Need to balance both quantity and quality of phone calls
- Increase in admin satisfaction as booking was easier but increased physician workload with answering booking messages
 - Will continue to monitor, train and educate
- Patients got lost in some call options and waited on the phone for > 30 minutes because message was in a loop (FIXED NOW)
- Need to continue to promote online booking/online communication to decrease call volumes, therefore, decrease call wait times
- Utilize website for booking requests for mass clinics to divert calls away from Call Centre (e.g. COVID vaccines, flu, pap, etc.,)

Thank you!
Questions?

Dr. Navsheer Gill
ngill@southlakeregional.org

Mary Nguyen
mnguyen@southlakeregional.org

Mount Sinai Academic Family Health Team

- Downtown Toronto, Ontario
- Family Health Team
- 6 administrative support staff
- We have a well-established PAC

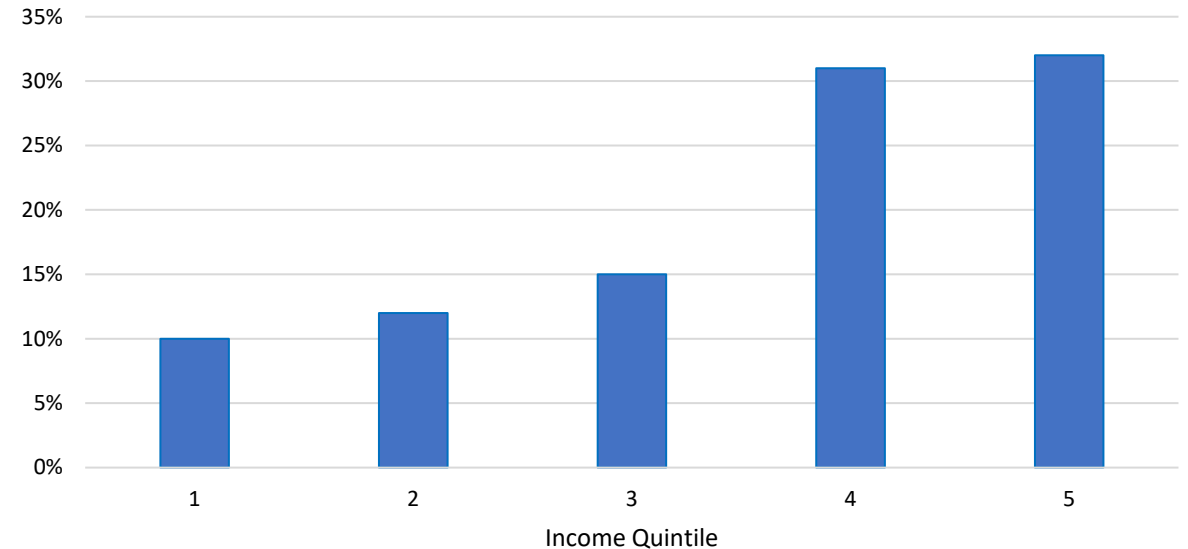
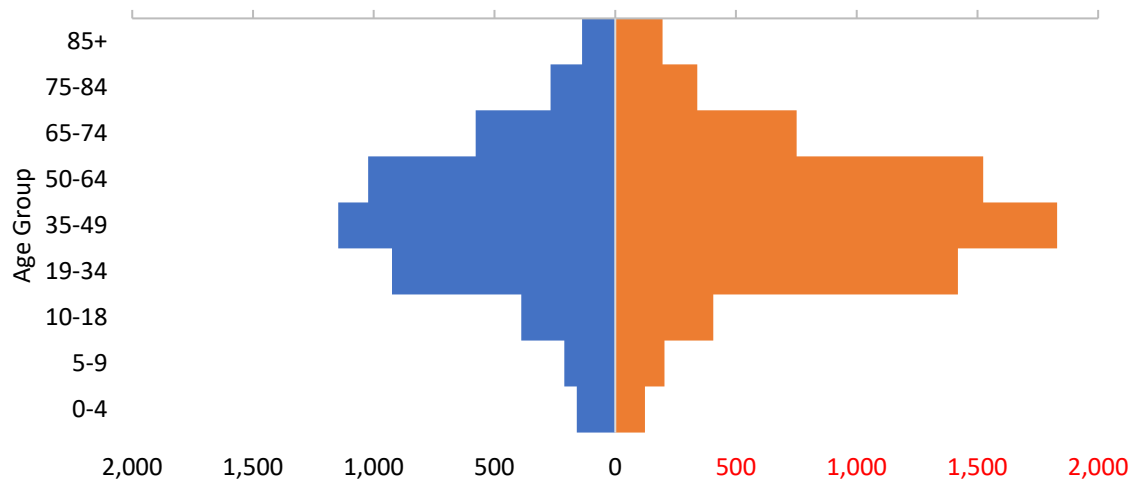


Mount Sinai Academic Family Health Team

Staff	12 Physicians	27 Resident Physicians	2 Nurse Practitioners	3 Nurses	10 Interprofessional Health Professionals	2 Diabetes Educators (RD/RN)
--------------	-------------------------	----------------------------------	---------------------------------	--------------------	---	--

Who are we caring for? 10,837 patients rostered

Female Male



Each administrative staff worked in a “traditional” system:

- Assigned to a number of physicians and IHPs
- Manages all administrative tasks related to these individuals
 - Check-in patients
 - Booking follow-up appointments
 - Answering the phone, responding to voicemails
 - Responding to e-mails
 - All admin work related to patients e.g., referrals
- Answering machines took calls any time of day with the ability to leave a message



Access identified as an issue

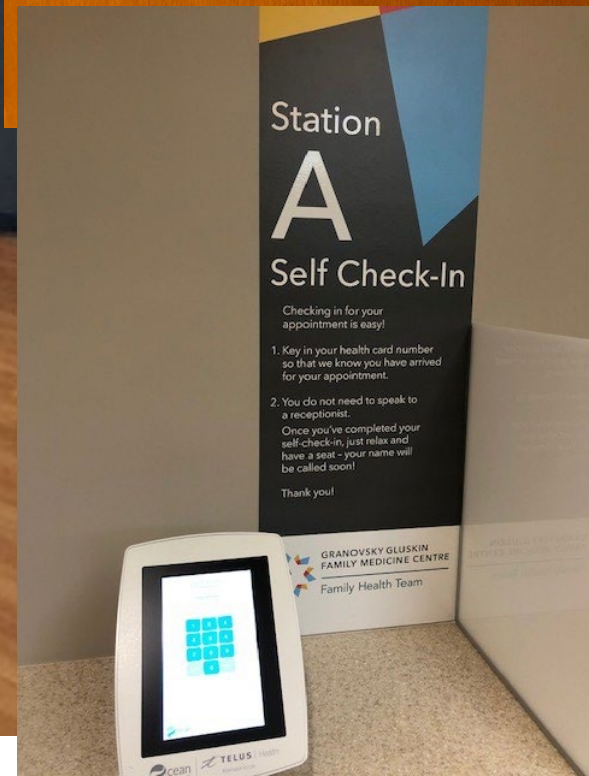
1. Patient experience survey: same day/next day availability was 33%
 - Pts reported not being able to get through on the telephone
2. Number of patient complaints
3. Patient guided tours: access issues related to difficulty with telephones
4. Patient Advisory Committee
5. Staff reported feeling overwhelmed, inability to complete all tasks



What we did...

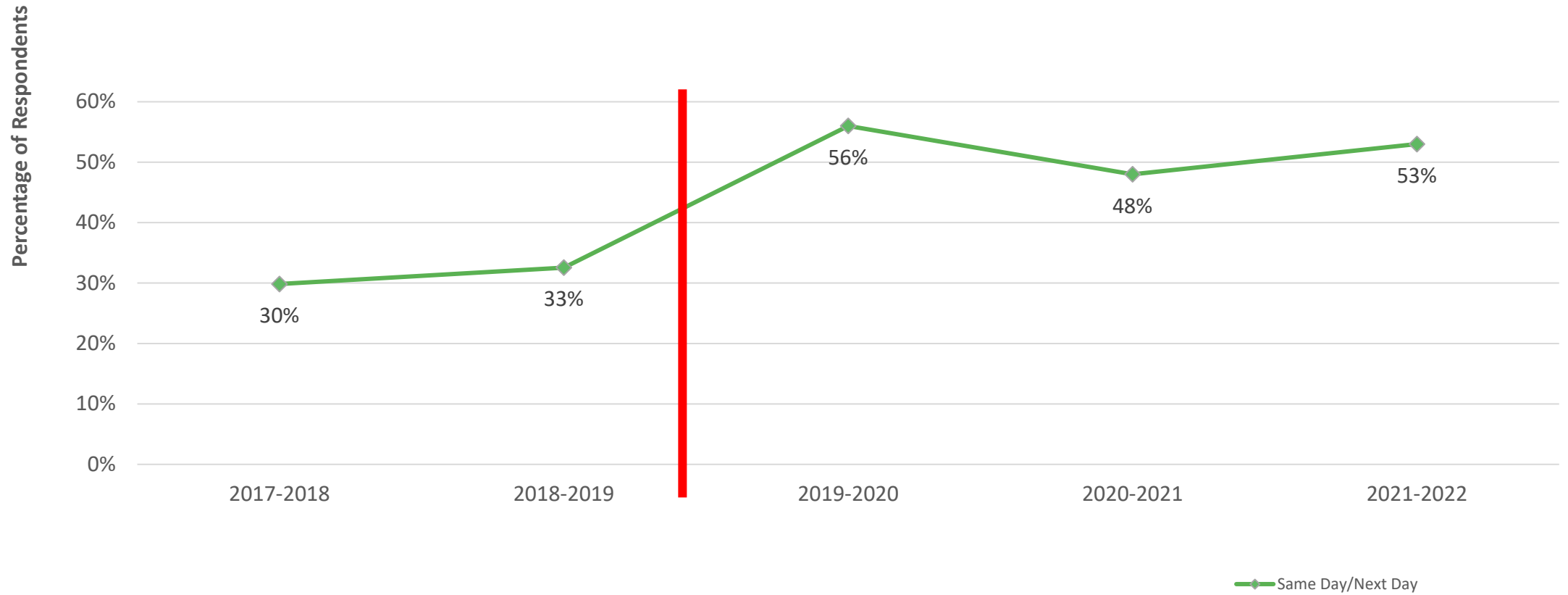
- Consulted PAC
- Admin and physicians involved in all steps of the process
 - Redesigned process map: more focused on tasks
 - Telephone system change: call center model, option for automatic redial, queuing system
 - Self check-in
 - Waiting room redesign



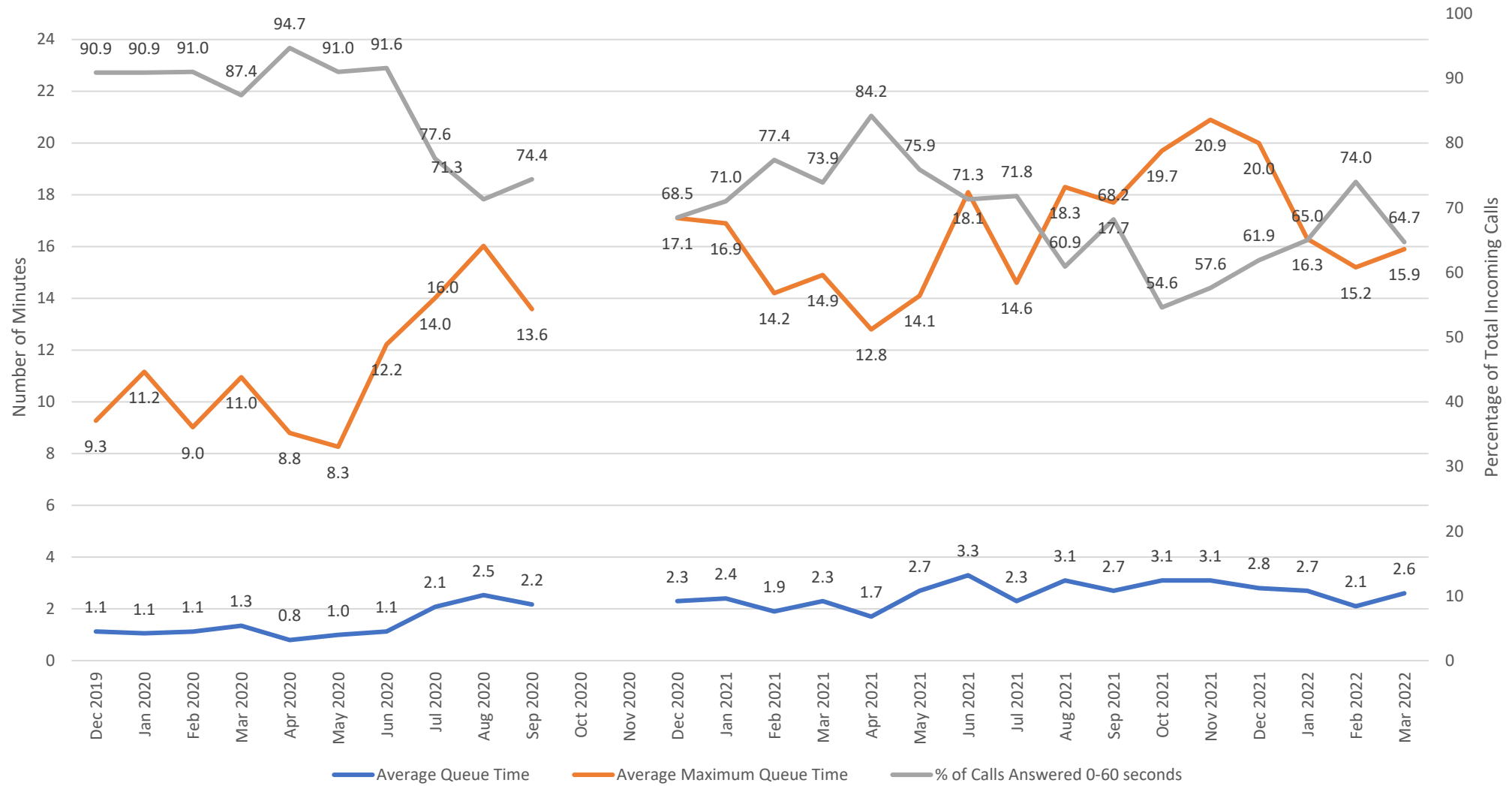


What happened?

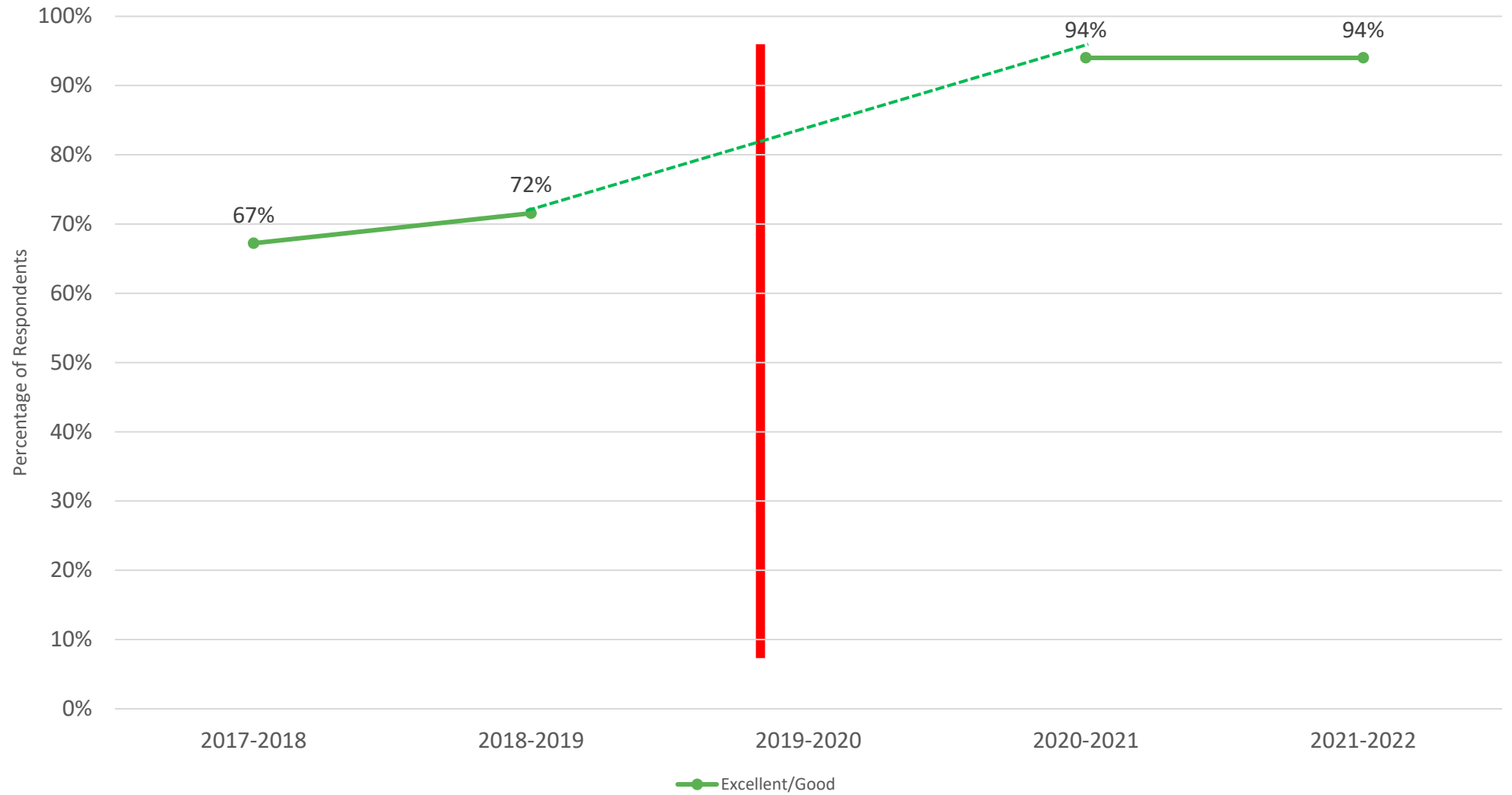
How long did it take from when you first tried to see your Doctor/Nurse practitioner/Nurse to when you actually SAW him or her in the office?



Phone System Performance - Queue Time



Thinking about your most recent visit, on a scale of poor to excellent, how would you rate your overall experience with our reception staff?



What happened?

- Positive PAC feedback
- No complaints from patients regarding the telephone system
- Staff feedback: greater job satisfaction, easier for them to complete tasks, felt they were better able to deal with patients



What will you be doing next?

- Continue to monitor call volume and wait times
- Further enhancing access: online booking to provide alternative means



What did you learn in the process?

- Important to get a picture from multiple sources of data
- Important to hear from the patient voice directly- moving towards a model of co-design. Involving PAC was essential in moving physicians and staff who were opposed to the change to a place of acceptance.
- Involving our PAC was also helpful in securing funding and getting Senior Management support.
- Staff satisfaction can impact their interactions with patients
- Changes can affect multiple aspects of patient care: e.g. access to clinic for patients, staff morale



Thank you!

Questions?

Dr. Sakina Walji

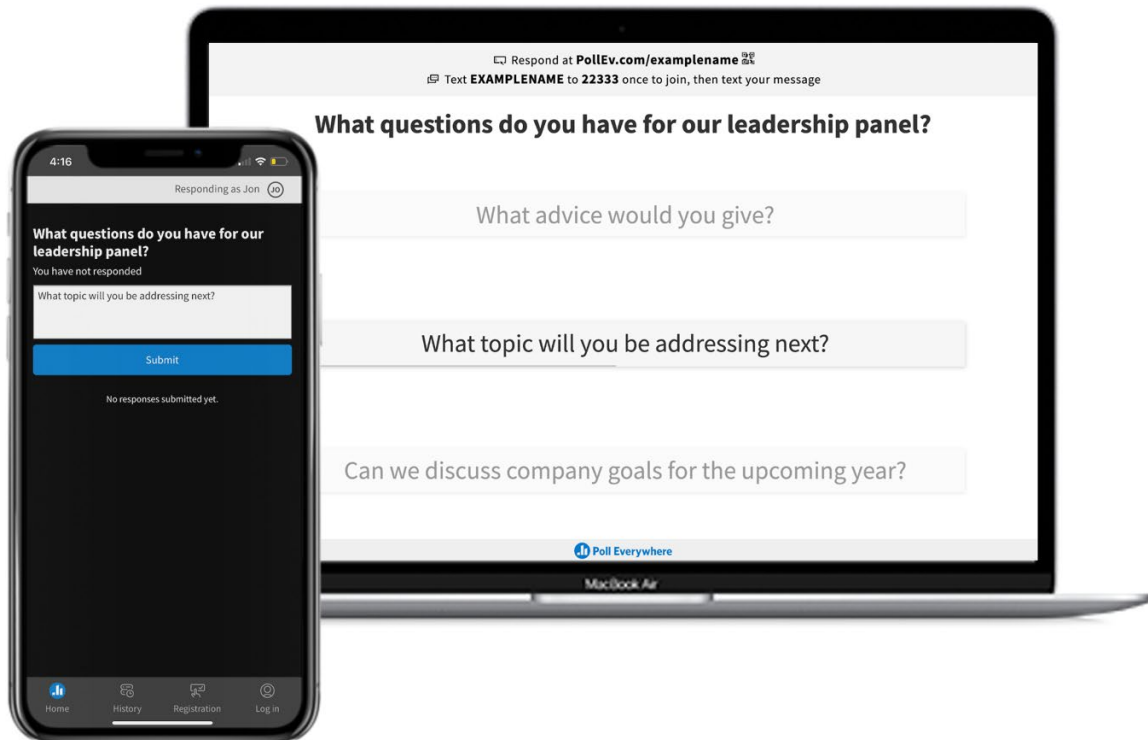
Sakina.walji@sinaihealth.ca



Poll Everywhere

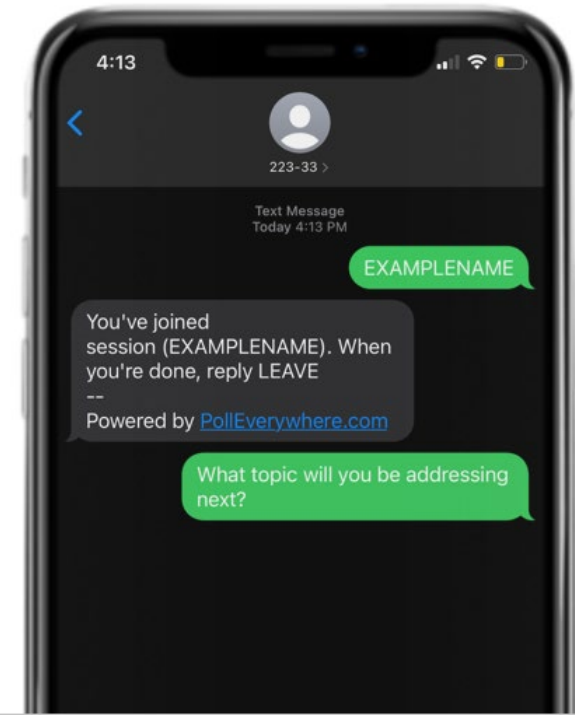
Web voting

Visit pollev.com/ictdfcm912. Wait for the question to appear, and type your response.



SMS voting

Start a new text message. Put the five digit code in the 'to' line. Type in **ICTDFCM912** followed by your answer in the body of the message.



Share & Learn: Helping Patients to Access Care

Please visit dfcm.utoronto.ca/share-learn view past session recordings and materials.

We appreciate your feedback! Please complete the post session evaluation that will be emailed to you after the session.