

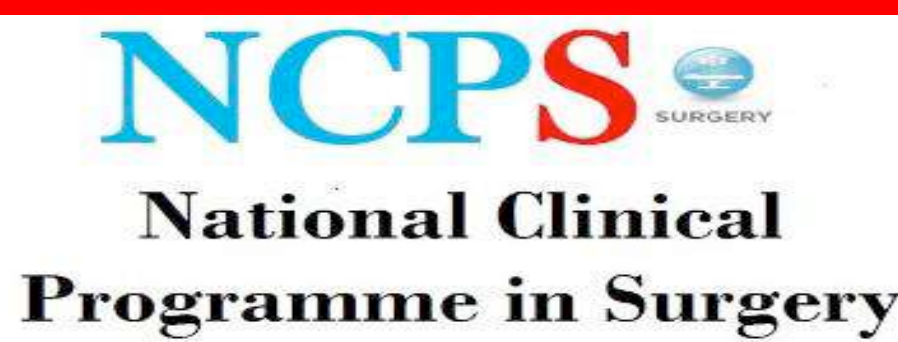


“See & Treat” Model for Minor Ops

Reduce OPD Wait Times for Minor Operative General Surgery Patients by providing Direct Access to Minor Procedures Clinic

Amy Gillis⁽¹⁾; Amy Carswell⁽¹⁾; Ita Hegarty⁽²⁾; Brendan O’Shea⁽³⁾; Mary Flynn⁽⁴⁾; Paul Ridgway^(1,3,5)

1: Tallaght Hospital, 2: Outpatient Services Performance Improvement Programme (OSPIP)
3: National Clinical Programme in Surgery (NCPS), 4: Irish College of General Practitioners (ICGP)
5: Royal College of Surgeons in Ireland (RCSI)



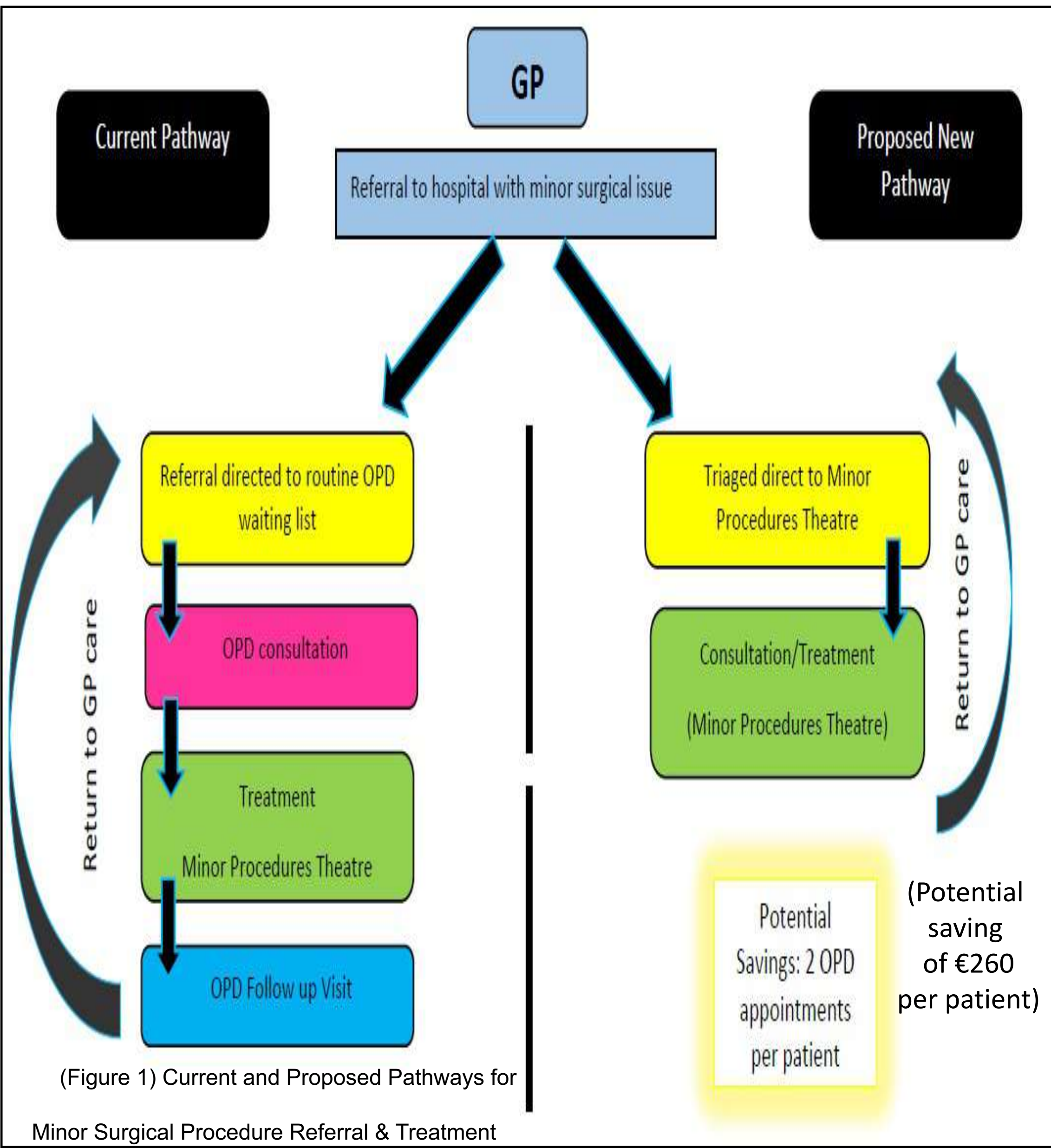
Introduction

- General Surgery carries the 3rd highest number of patients on Out Patient Department (OPD) waitlists
- Minor operative procedures represent 69% of General Surgery day case activity (exc.endoscopy) (BIU).
- Access for patients to minor procedure theatres can be convoluted

Objectives

Clinic by direct GP referral to minor procedures theatre for appropriate conditions; patients receive consultation and procedure at the same visit. Follow up is then arranged with the GP for results

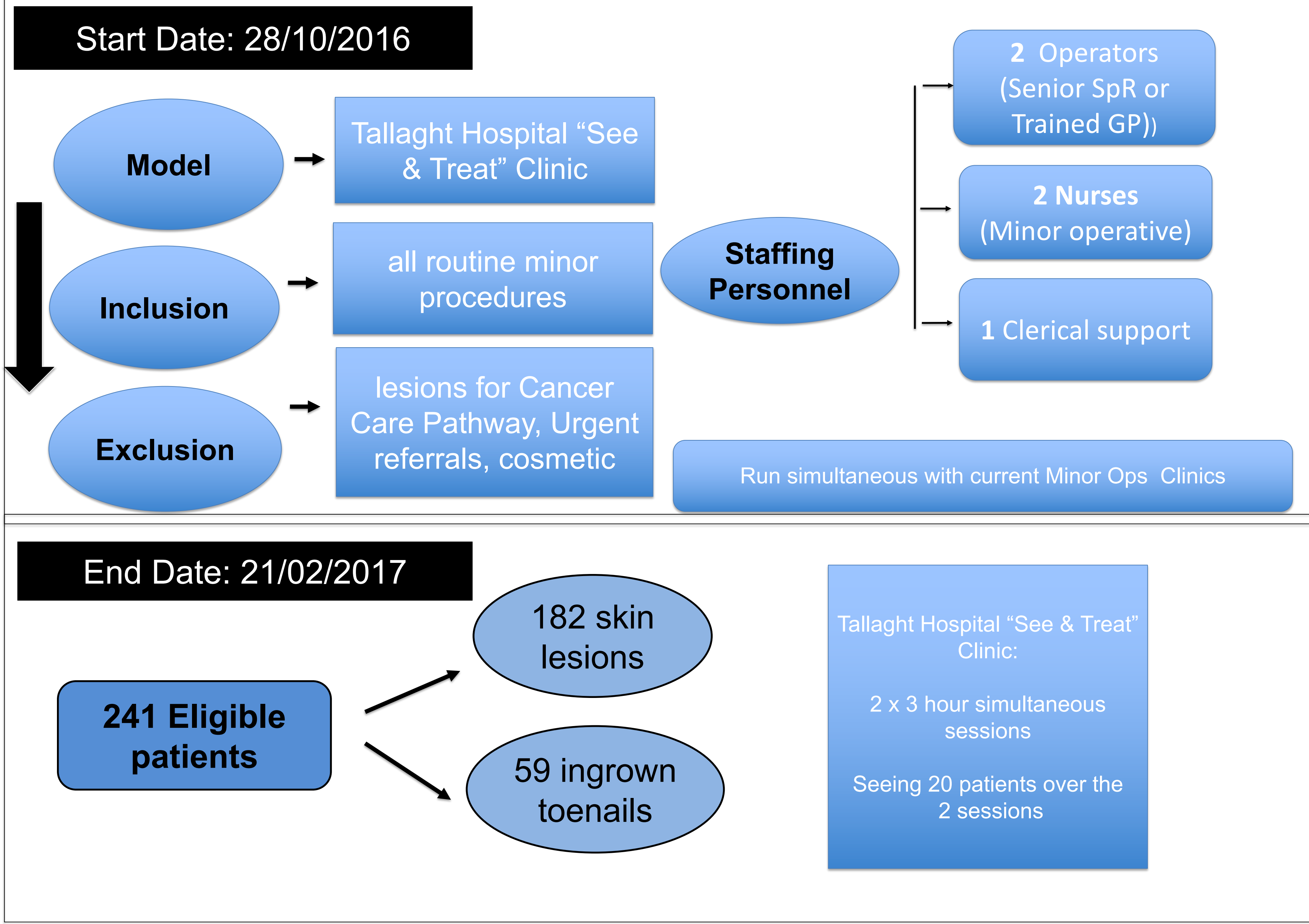
(Figure 1)



Results

- A “See & Treat” model is effective in reducing the waiting times for patient with relative minimal expenditure (Figure1)
- A reduction in the number of OPD appointments for patients of this cohort by consolidating consultation and treatment
- Enables direct access for GPs for minor procedures fostering a more accessible relationship & the patient is returned to GP care promptly
- Reduces waiting time for patients accessing the service.

Methodology



Tallaght Hospital OP	Waitlist (n) (Dec 2016)	Eligible (Minor Ops) Patients Processed	Patients treated in “See & Treat” Clinic
No. Patients Processed	1251	241 (19%)	126 (12%)
Patients removed /Suspended by WL validation		31 (3%)	115 treated in regular OPD Clinic
National Projections (Dec 2016) NTPF General Surgery			
	Waitlist (n) (Dec 2016)	Eligible (Minor Ops) Patients	Patients “See & Treat” Clinic (potential)
No. Patients	32, 861	6244 (19%)	3,943 (12%)
Projected WL validation		986 (3%)	

Longest waiting patient: 13 m

NOW

Average wait time: 12 weeks

No. Patients waiting >6 m: 68

NOW

No. Patients waiting >6 m: 0

Conclusions

- Short Interval intervention = significant wait list reduction
- Wait list validation by patient telephone calls was key to streamlining

Future goals:-

- E-referral for Minor Procedures (streamline GP referrals, provide electronic means of tracking referral for the GP)

- “See & Treat” are a means of consolidating and streamlining treatment for patients with minor procedures
- Establishing a clinic where patients are directly referred from general practitioner services to obtain a consultation and, if suitable, treatment undertaken at one event
- The patient is then returned directly to the care of the family doctor for suture removal and review of pathology

This effectively reduces waiting times for patient and provides direct access to surgical services for general practitioners. By consolidating the initial consultation and treatment in one encounter, and arranging follow up with GP services, two patient encounters in the outpatient department are avoided, thus outpatient waiting lists are effectively reduced. The “See and Treat” Model transferable to Model 3 and 4 Acute Hospitals in Ireland