

**Project Name:** Increasing Appointment Access for EHC Patients **Date:** 12/21/2015

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| **Objective** | **Measures of Success** | **Action Steps/Responsible Party** |
| Create new appointment slots | Are the new slots created? | Elizabeth |
| Fill new appointment slots with EHC patients | Are the slots being filled? | EHC Providers/Front Desk |
| Reduce ER Visits | Patients seen for new Monday appointments are not seen in the ED | Kim |
| Patients become established with PCP | PCP keeps both appointments. Monday urgent appointment and 2nd new patient appointment | BVCHC: Tracking and reminding patientsPatients: Keep appointments |
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**Follow – Up**

2 month follow-up to determine staff perception of accessibility and compare with utilization of the 8am-9am Monday appointment slots

**Action Plan**

**Target Condition Goals**

* Establish with PCP for timely management of chronic conditions
* Reduce ER Visits
* Increase utilization of 8am-9am Monday morning appointment slots
* Improve quality of life for vulnerable patients

**Analysis**

4-8 Patients every Saturday present with no PCP and ongoing medical conditions that should be managed.

80% of these patients are not considered urgent due to:

* Currently being well managed
* Have a current supply of medication
* Still have a relationship with former PCP

20% have an urgent need to be established with a PCP

Next available new patient appointment is 1-3 months out

**Current Condition**

Patients are currently being referred to the ED or to their previous PCP if applicable. BVCHC will book a new patient appointment to establish care but the wait time is approximately 3 months.

Book Apt for Monday and for new patient apt ≈ 3 months

Book Apt for next available new patient apt ≈ 3 months

Non-urgent

Urgent

Needs PCP

EHC Patient

Book Apt for 3 months later

Needs PCP

EHC Patient

**Background**

Patients are presenting during Express Healthcare (EHC) without a current PCP and multiple co-morbid conditions.

**Analysis (continued)**

Currently:

New: