Improving Your Clinic's Wait Times

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Objective:

- Plan and manage the operation such that wait times are consistent with consumer expectations for "urgent care."
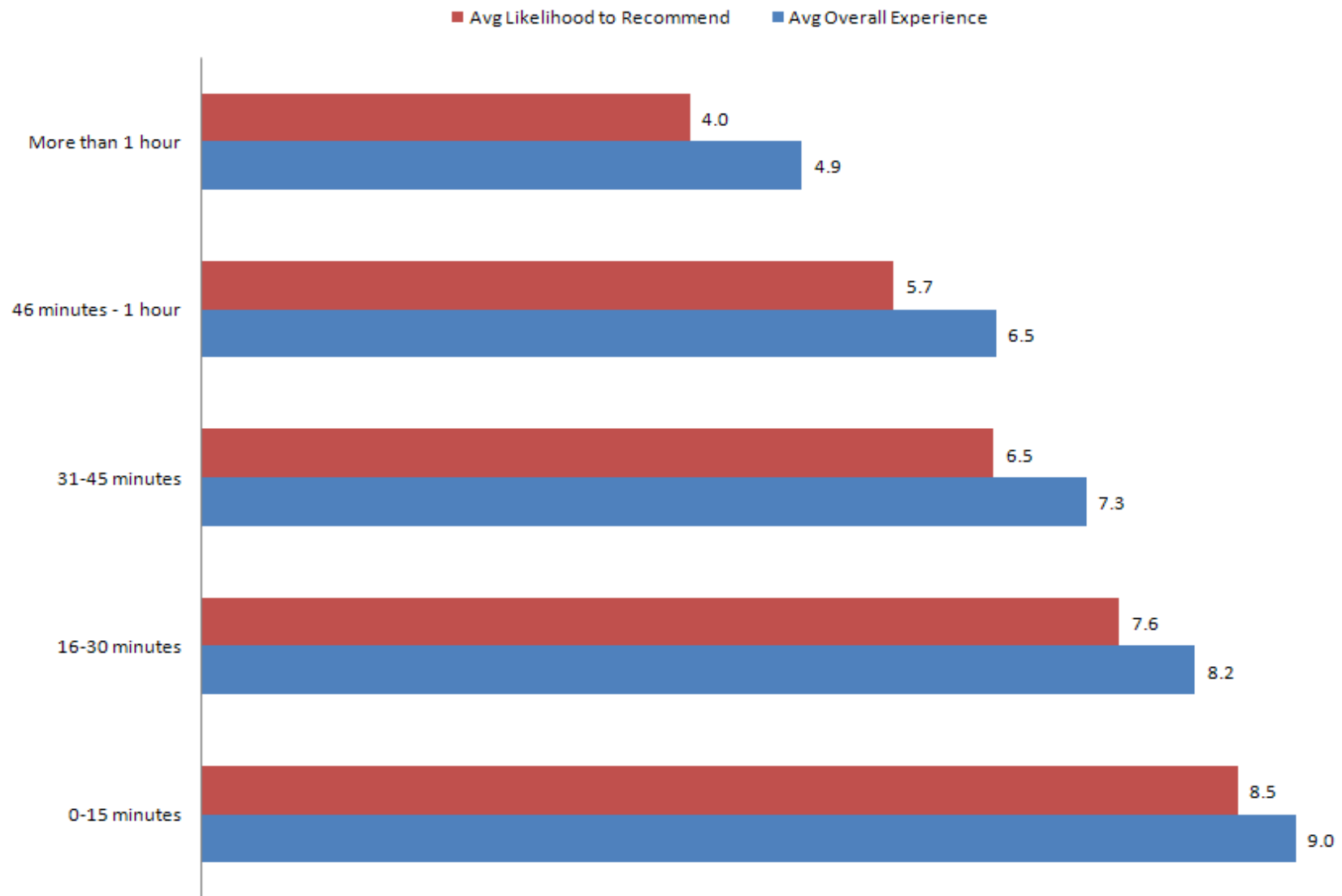
Impacts:

- Patient Satisfaction
- Operational Efficiency

Constraints:

- Walk-in clinic must be prepared to handle whatever situation or volume comes through the door.
- Facility capabilities and staffing levels must be conducive to profitability.
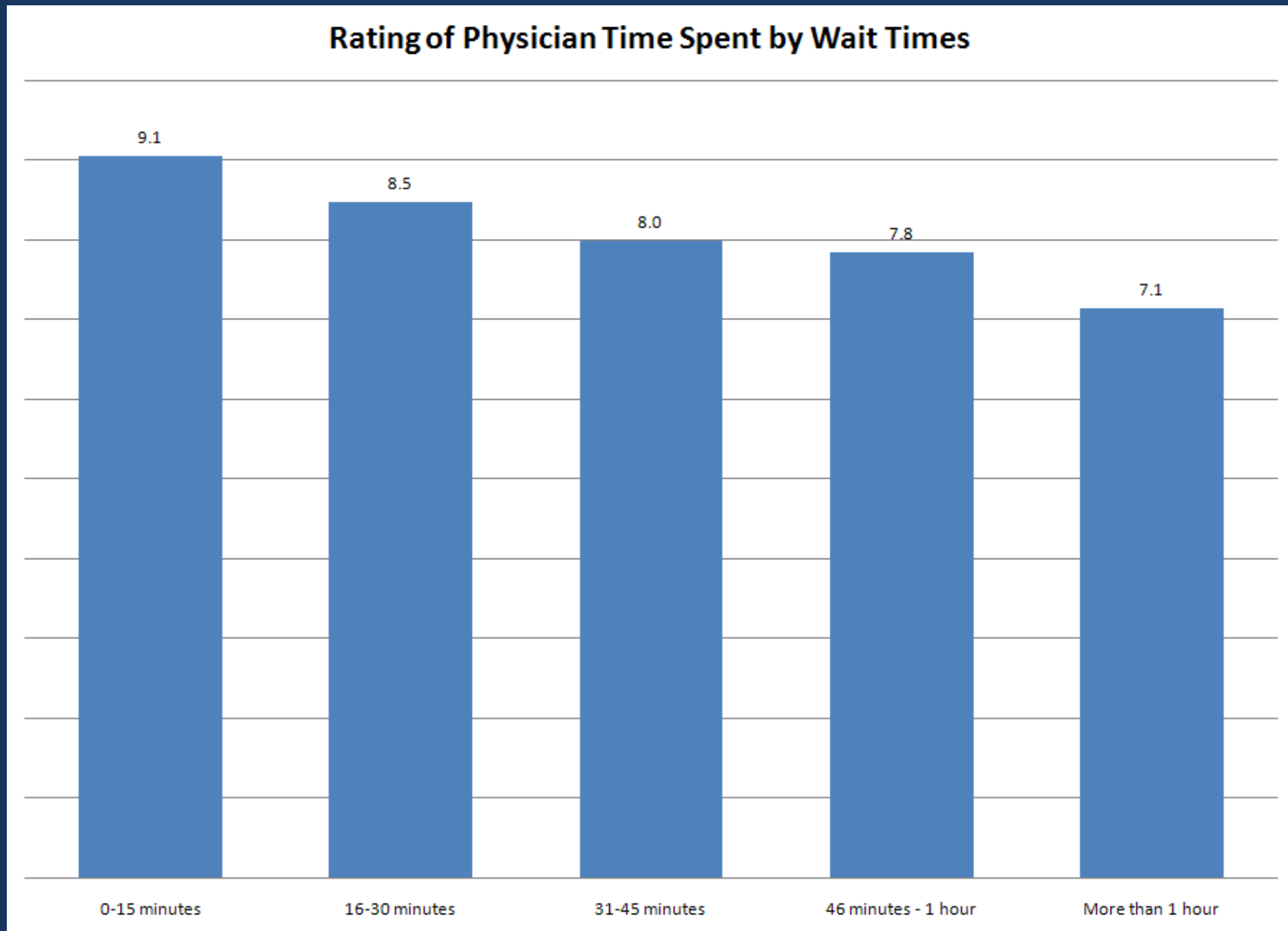- Some waiting is inevitable.

Wait Times Influence All Patient Perceptions

Self-Reported Wait Times and Word of Mouth
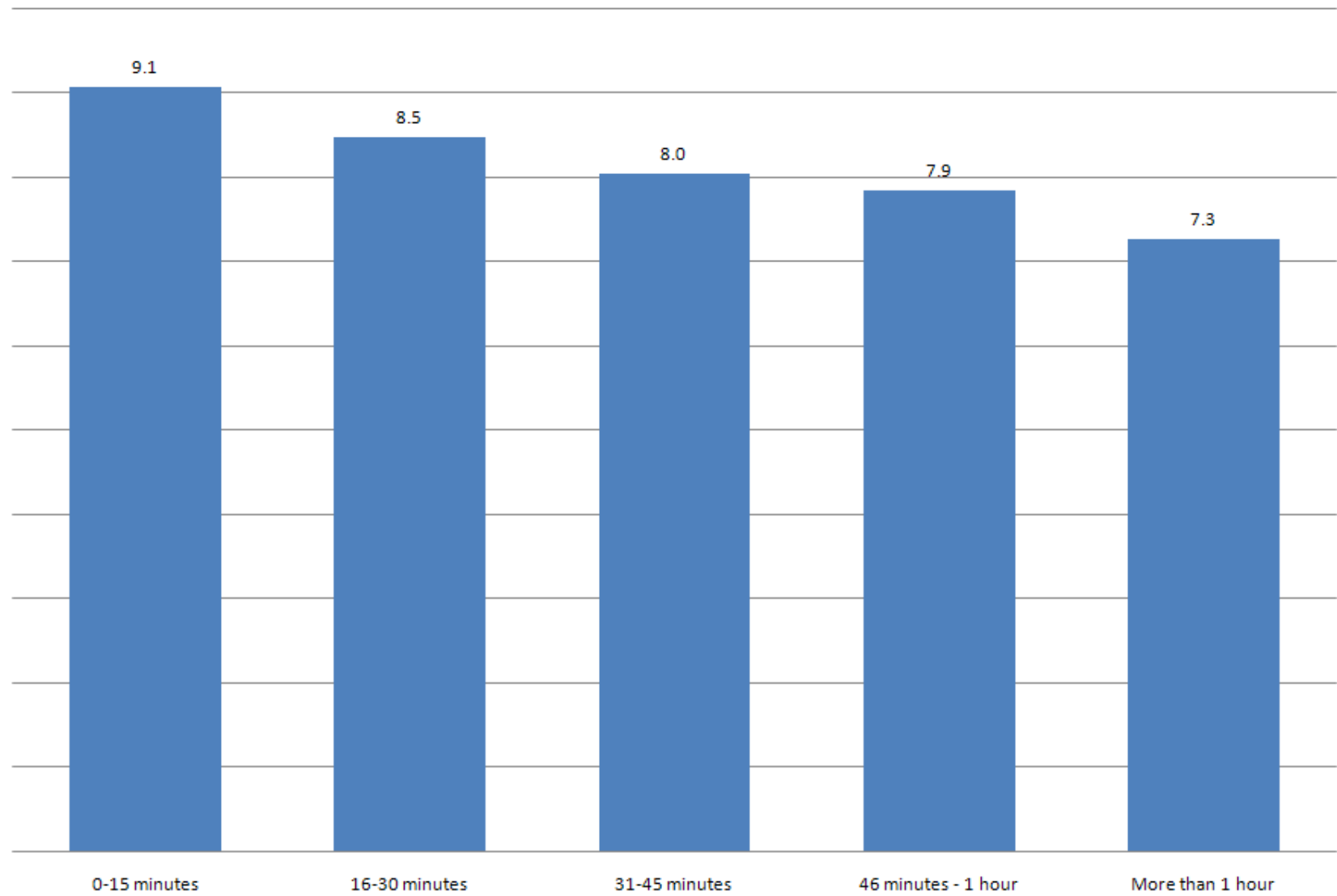

Correlation of Wait Times and Patient Satisfaction

■ Avg Likelihood to Recommend   ■ Avg Overall Experience

Wait Time	Avg Likelihood to Recommend	Avg Overall Experience
More than 1 hour	4.0	4.9
46 minutes - 1 hour	5.7	6.5
31-45 minutes	6.5	7.3
16-30 minutes	7.6	8.2
0-15 minutes	8.5	9.0

Wait Time Impact on Perceptions of Time Spent w/Provider

Rating of Physician Time Spent by Wait Times

Wait Time	Rating
0-15 minutes	9.1
16-30 minutes	8.5
31-45 minutes	8.0
46 minutes - 1 hour	7.8
More than 1 hour	7.1

Wait Time Impact on Perceptions of Medical Quality

Rating of Medical Quality by Wait Times

Wait Time	Rating
0-15 minutes	9.1
16-30 minutes	8.5
31-45 minutes	8.0
46 minutes - 1 hour	7.9
More than 1 hour	7.3

Wait Time Impact on Perceptions of Cleanliness

Rating of Facility Cleanliness by Wait Times

0-15 minutes	16-30 minutes	31-45 minutes	46 minutes - 1 hour	More than 1 hour
9.0	8.5	8.1	7.9	7.4
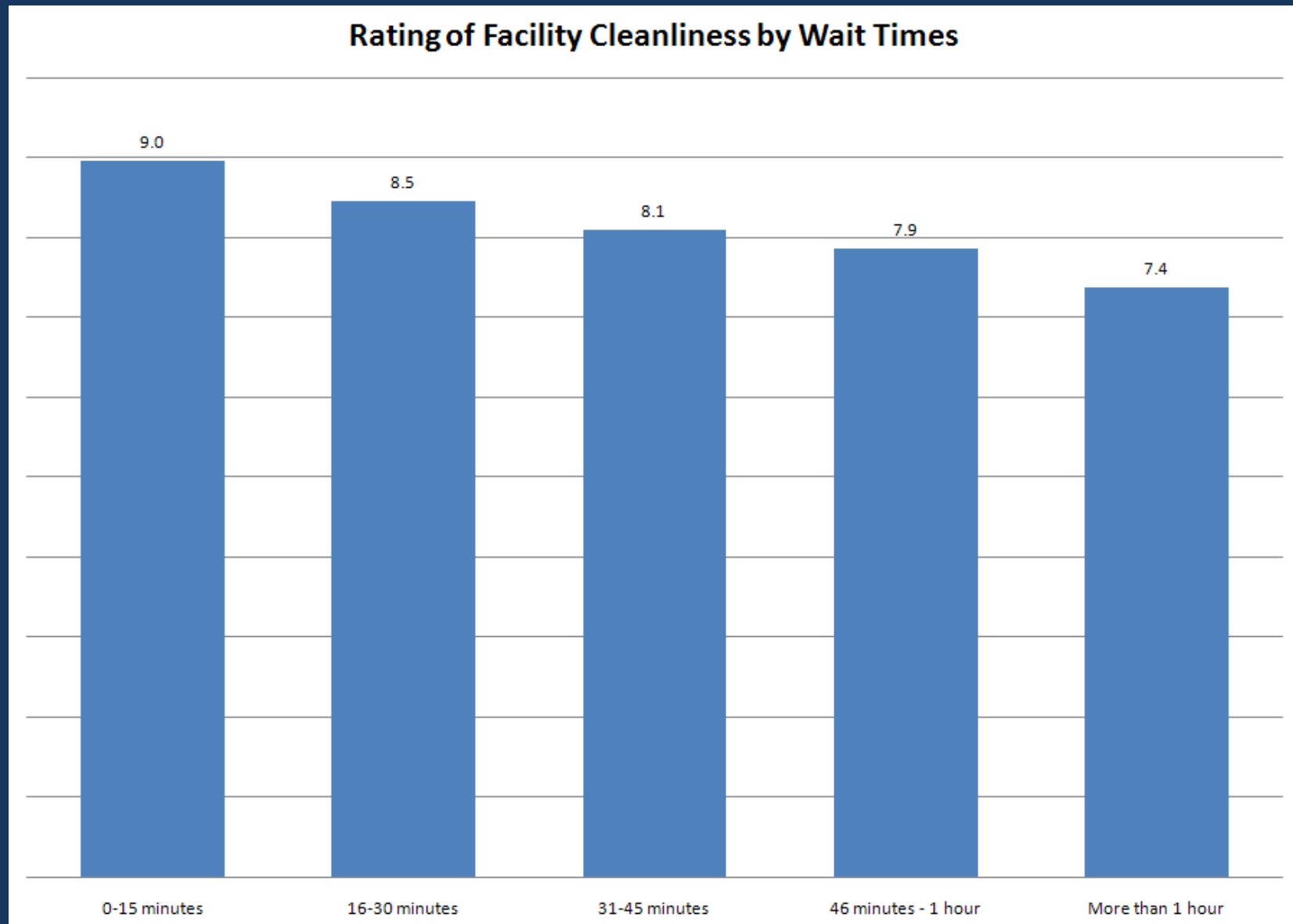
Wait Time Impact on Ancillary Service Growth

Percent of Patients Willing to Use Urgent Care for Ancillary Service

	0-15 minutes	16-30 minutes	31-45 minutes	46 minutes - 1 hour	More than 1 hour
Yes	77.4%	75.0%	73.6%	70.6%	69.5%
No	22.6%	25.0%	26.4%	29.4%	30.5%
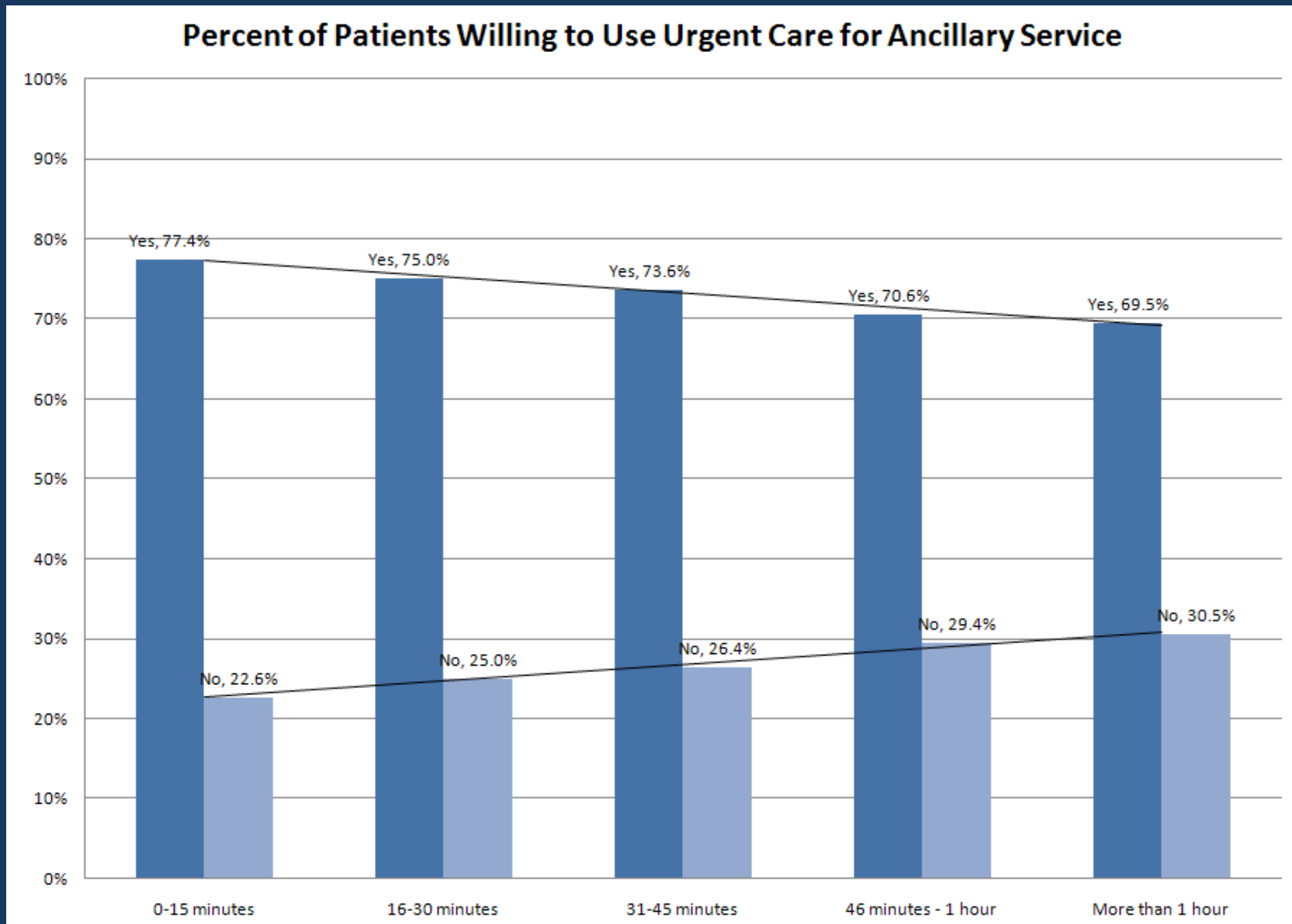
Determinants of Wait

Determinants of Wait

- Length of stay
  - Also called "Throughput" or "Turnaround Time"
  - Total length of time between patient's arrival and departure

- Process approach
  - Understand how patients move through the center
  - Document all steps in a process flow chart
  - Identify steps where waits occur
  - Evaluate reasons for each wait

Flow Chart: Map All Steps from Arrival to Departure

Patient Arrival and Registration Process

Patient Arrives at Center → Patient Signs in, Picks up Clipboard → Patient Completes Forms, Signs Notices, Returns to Front Desk →

Front Office Copies ID Cards, Demographics Entered in Billing System → Front Office Verifies Insurance on Payer Website → Front Office Collects Co-Pay, Issues Receipt →

Front Office Creates Paper Chart → Front Office Notifies Back Office of New Patient

Sample Time Tracking Template for Patient Workflow

Activity	Start Time	Finish Time	Total Time	Wait Time
Patient signs in, provides ID and insurance card, and picks up registration paperwork for completion. Front desk verifies insurance eligibility, co-pay, and deductible.				
Front desk reviews paperwork, collects co-pay, and enters patient demographic data in billing system. Front desk assembles chart and passes to the medical assistant for triage.				
Medical assistant calls patient back to the clinical area, records patient's symptoms, takes vitals, and puts the patient in an exam room. Patient chart is placed in the provider's queue.				
Patient is evaluated and treated by the provider. Provider documents chart, marks billing and diagnosis codes on charge ticket, and writes prescriptions.				
Medical assistant provides scripts and discharge instructions to the patient. Patient is escorted to the discharge counter, chart is coded, charges are determined, and balance is collected.				

Process Approach

- Identify "value-added" activities
  - Tasks that cannot be avoided
    - Recording demographics, verifying insurance, collecting co-pay
    - Conducting history and physical, documenting findings in chart

- Eliminate "non-value-added" activities
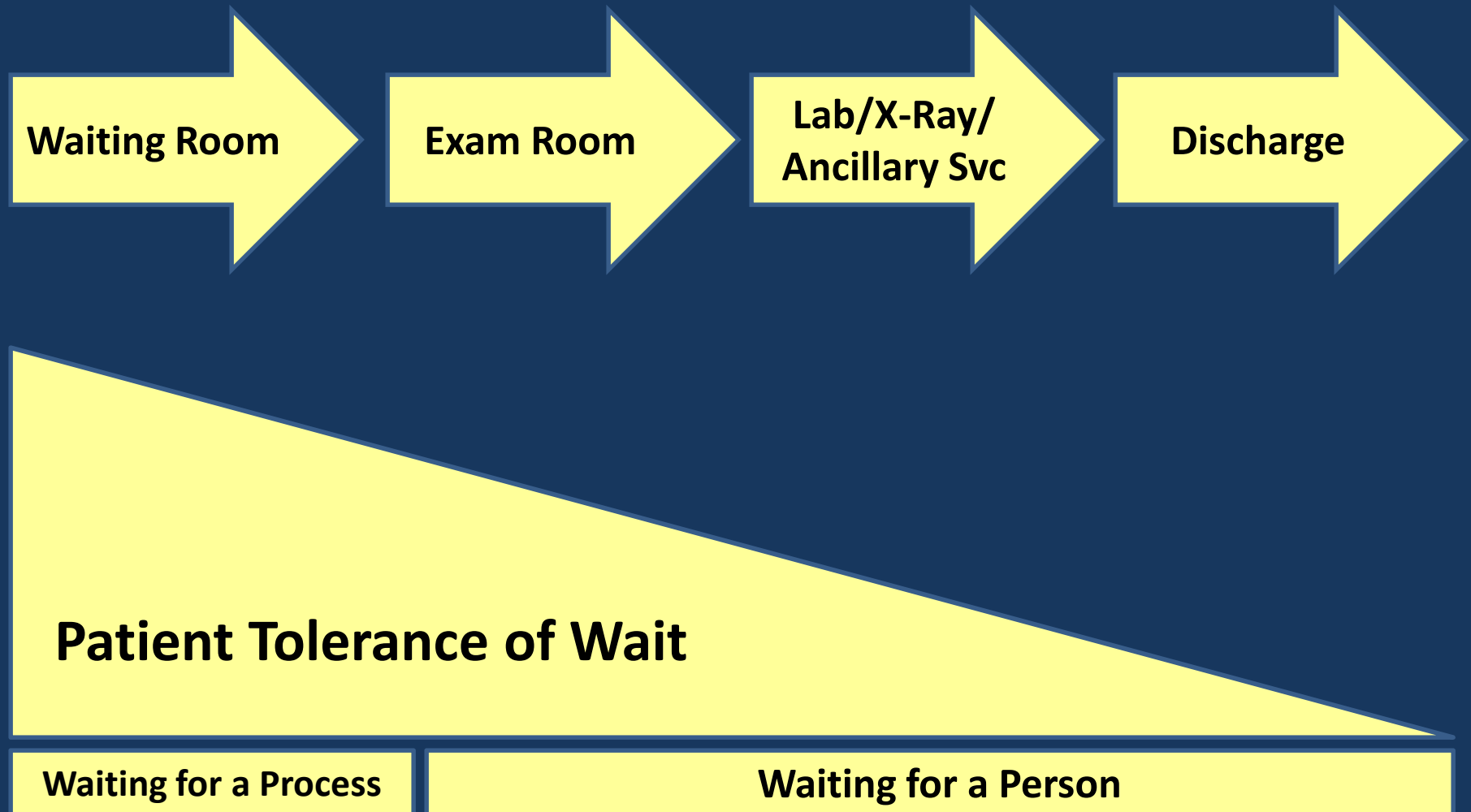 - Tasks not necessary to treat the patient and get paid

Process Approach, cont'd.

- Consolidate duplicative processes
  - Repetitive collection of billing info, vitals, patient history

- Identify activities that can be conducted in parallel
  - Registration or discharge in the exam room

- Identify activities that can occur after patient leaves
  - Coding, charge entry for insurance billing

Where is the Better Place to Wait?

Patient Tolerance of Wait Decreases as the Visit Progresses

Waiting Room → Exam Room → Lab/X-Ray/Ancillary Svc → Discharge →

Patient Tolerance of Wait

Waiting for a Process | Waiting for a Person

Wait Time Solutions

Communicate Wait Times and Provide Updates

- Set accurate expectations up front
  - Be precise—say "waits are running about 25 minutes," not "we'll see you in a little while."
  - Better to overestimate wait times.

- Setting expectations put patients in control
  - Provides option of waiting or returning later

Communicate Wait Times and Provide Updates, cont'd.

- Promptly inform patient of any changes
  - Remaining wait time
  - Place in queue

- Communication provides transparency
  - Demonstrates efforts to move patient through quickly
  - Reduces odds patient will leave without being seen

Engage Providers and Staff in Reducing Wait Times

- Establish sense of urgency among all staff members

- Understand and practice "urgent care medicine"
  - Realize importance of urgent care pace, flow, turnaround
  - Assure communication and decision-making styles fit urgent care model
  - Establish referral relationships as a strategic resource

- Pay financial incentives tied to wait time goals
  - Performance pay for physicians based on throughput
  - Staff bonus based on customer service survey

Chart time-of-day flow to align staffing levels to demand and use scheduling to divert visits to off-peak times.

Center Hours:
10 am to 8pm
7 Days/Week

Weekday/Weekend Volume by Hour

| Weekday | Weekend |

Recheck Appointments
Ancillary Services
Reduced Staffing
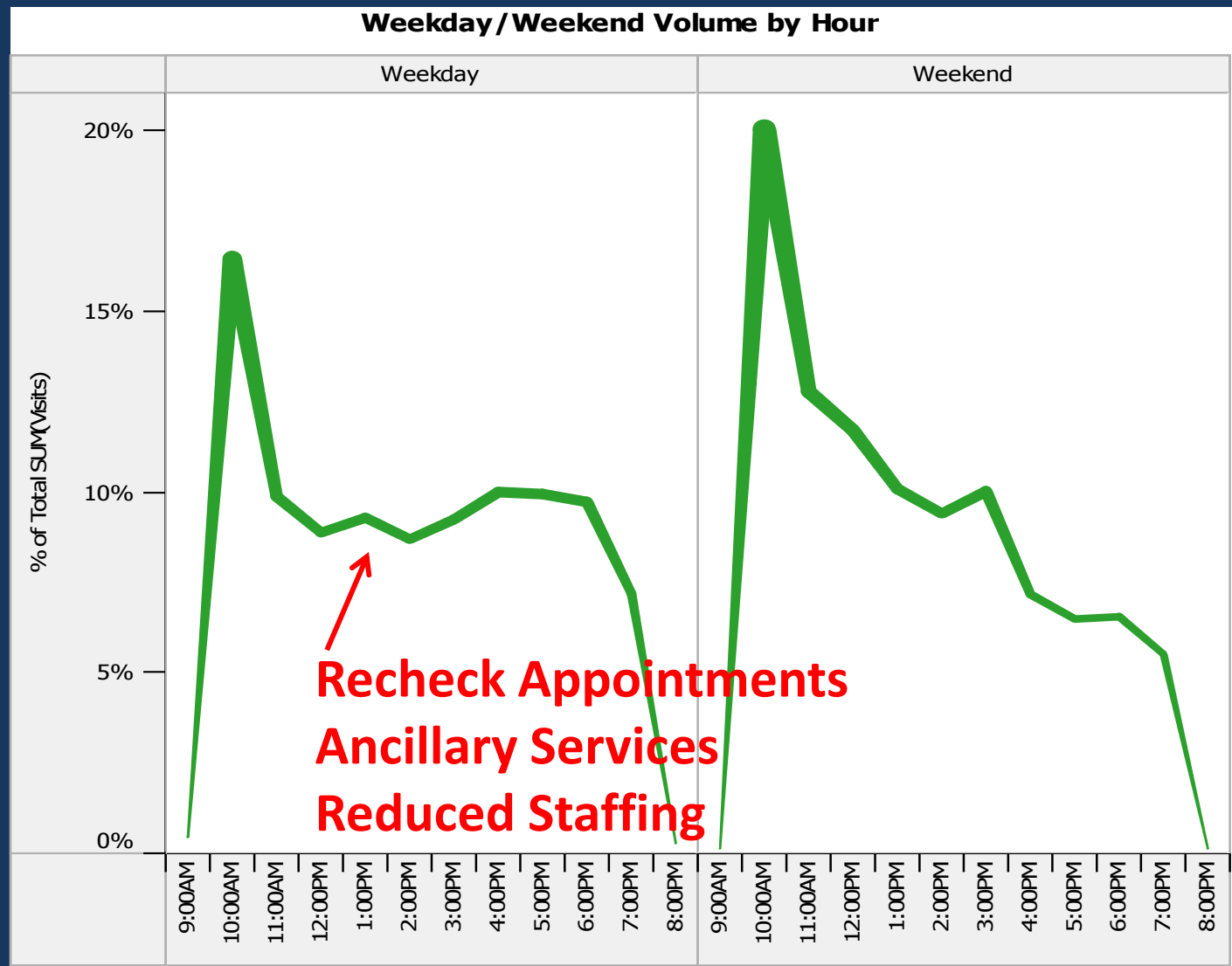
Scheduled Appointments

- Walk-in peaks and ebbs in flow
  - Mondays and Fridays
  - Opening to Noon
  - After School to Close

- Scheduled appointments
  - Re-checks, physicals, ancillary services
  - Divert patients to off-peak times
  - High risk of no-shows

Staffing Levels

- Match staffing levels to center volume
  - Part-time staff or nurse/mid-level to improve flow during peak times
  - Light staffing to reduce costs during off-peak times

- Cross-train staff:
  - Front/back office
  - X-ray/medical assistant
  - Provider/x-ray/lab testing

- Set time aside for administrative tasks
  - Documentation, follow-up, communication
  - Create a solution for telephone interruptions

Implement a "Fast Track" Process

- "Fast Track" routine testing, physicals, and immunizations
  - Separate registration with clear directional signage
  - Dedicated staff and streamlined processes focused on efficiency
  - Open during peak times

Implement a Triage Process

- Triage determines acuity and priority for seeing provider
  - Reduces risk by identifying emergencies
  - Selects most appropriate provider based on symptoms
  - Sets expectation for wait times based on services in queue
  - Provider plans order of care to reduce total wait times

Patient Status White Board

- Results in faster average turnaround times than "first come, first served"
  - Central location, accessible to providers and staff
  - Room #, last name, arrival time, medical assistant, provider, services required
  - Integrate with flag system, front office communication

Pre-Registration or Registration Kiosk

- May improve front-office efficiency and accuracy
  - Direct entry of patient data
  - Automates verification processes
  - Eliminates paper through electronic signature capture
- May not reduce total wait times
  - Provider, not front office, is usually the bottleneck
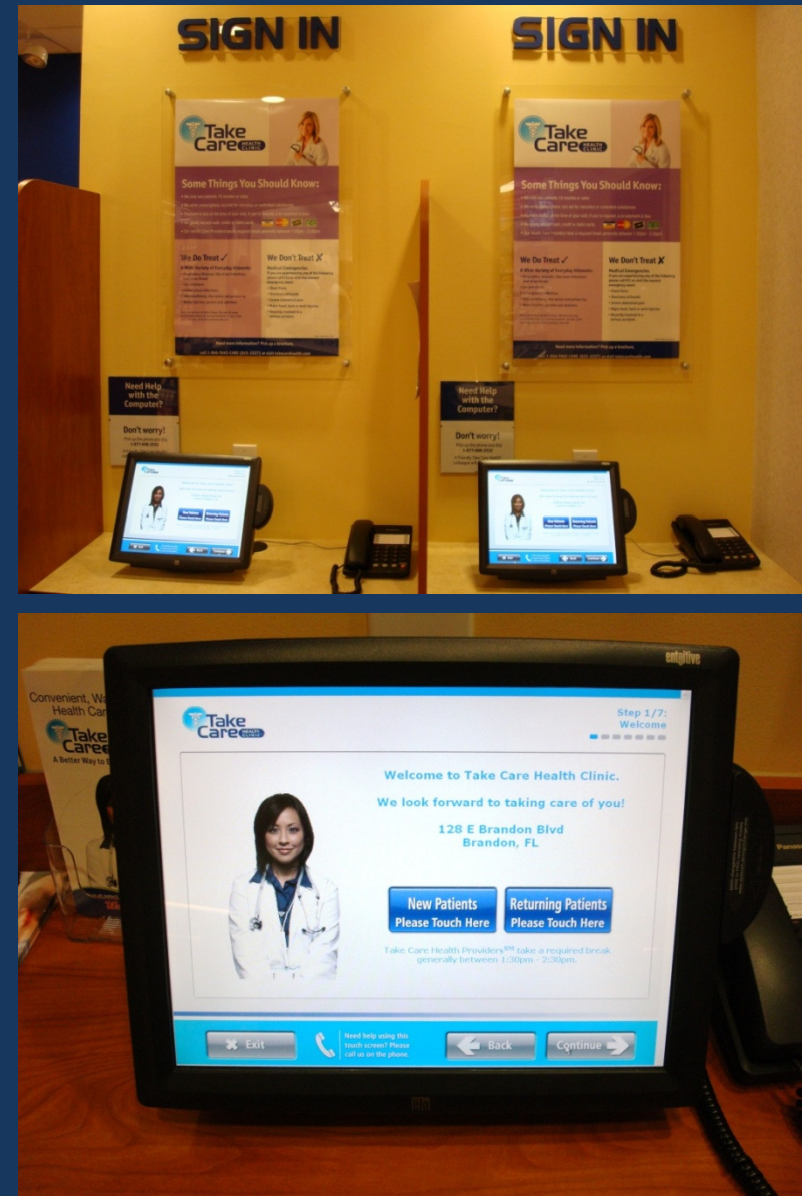
Let Patients Decide Where to Wait

- When wait for provider is expected to exceed 45 minutes
  - Complete registration process, collect co-pay
  - Record patient's cell phone number
  - Give estimated time for return
- Call patient within 15 minutes of provider availability
- When patient returns, take straight to exam room
- Keeps patients in control of their time
  - Patient chooses whether to wait at the center, run errands, return to work, or wait at home
- Reduces crowding in the waiting room
- Often perceived as "zero wait"

Online Registration and Check-in

Online Registration and Check-in

- Same-day service only
- Patient registers online
- Clinic verifies insurance
- Patient entered in queue
- Patient called within 15 minutes of provider availability
- Patient arrives, pays co-pay, signs notices/authorizations
- Short wait or straight to exam room
- Wait occurred on patient's terms
- Perceived as zero wait time
- Marketing differentiator/competitive advantage

Technology Solutions for Reducing Wait Times

- Athletic Stopwatch or Kitchen Timer
  - Count Upward: Shows total time in process or queue; downside is staff has to monitor timer
  - Count Down to Zero (w/Alarm): Reminder to check-up on patient; downside is alarm noise and clock doesn't show total time waiting

Technology Solutions for Reducing Wait Times, cont'd.

- Electronic Medical Record
  - Physically accessible to provider
  - Free from distraction
  - Automated coding engine
  - Integration with radiology, pharmacy

- Streamlined Paper Chart
  - Checkbox templates

Evaluate Physical Facility

- Is the center layout conducive to good flow?
  - Provider, staff, and patients move through orderly process.
  - Ready access to medical supplies, computer/EMR, telephone, etc.
  - Tasks are placed within proximity/logical order of one another.
 - Layout fosters good communication between front and back office.

Evaluate Physical Facility, cont'd.

- Are there any physical, psychological or social obstructions?
  - Limit physical walking distance/movement between activities.
  - Limit interruptions to staff (from both inside and outside the clinic).
  - Control non-work related activities (idle chit chat).

- Is there a sufficient number of exam rooms for expected volume?

If you just can't reduce wait times,
take steps to make the wait more pleasant.

Keep Patients Comfortable and Engaged

- "Welcoming room," not waiting room
  - Strong brand statement
  - Variety of seating
  - Hourly clean sweep
  - Trash can and atomizer
  - Kleenex and hand sanitizer
  - Easily accessible restroom
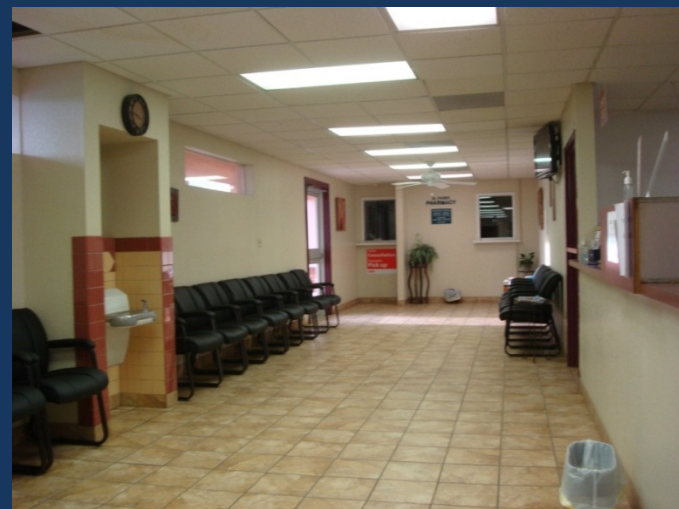
Waiting Room Amenities

- Coffee/water/soft drinks, light snacks for extended waits

- Magazines (relevant and current selection)

- Children's books/ magazines, game consoles, coloring sheets (no toys)

- Television

  - Light, engaging: HGTV, Food Network, TV Land

  - Avoid local programming, news and politics, "sleaze" talk shows

Exam Room Amenities

- Pay attention to details in the exam room
  - Coat hook/bag stowage
  - Television/video (w/volume control)
  - Magazines
  - Window (w/shade or blinds)
  - Extra seating (for family members)

Marketing Implications

- Avoid advertising specific wait times
  - "Visits in under an hour" or "See a doctor in 15 minutes"
  - Often misinterpreted as a service guarantee
- Correct misperceptions about urgent care
  - "Urgent" does not means "zero wait"
  - "Urgent" does not mean "Emergency"
- Emphasize convenience benefits of urgent care
  - No appointment necessary
  - Extended evening/weekend hours
  - Shorter waits than hospital emergency room

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