

# Improving Patient Access to Care in Medical Gynecology Through Realignment of the Care Team Model

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# DEFINE

#### BACKGROUND

The medical gynecology team serves as an entry point to the Department of Medical & Surgical Gynecology for many patients seeking to establish care within the department. This includes evaluation and management of new and complex conditions and routine gynecologic care. The medical gynecology team is comprised of 2 part-time consultants and 3 full-time advanced practice provider (APP) staff. Based on the practice model that was historically utilized, consultant and APP staff saw new and consult appointments, as well as managed all of their own return patient visits in a methodology most resembling provider-based patient panels.

#### **GAP IN QUALITY**

As each provider was responsible for supporting the needs of established patients, calendar templates had a disproportionate volume of return patient slots, making it difficult for new and consult (N&C) patients to see a consultant. Patient care was therefore delayed for new medical gynecology patients wishing to establish care within the department, leading some patients to see outside care. Further, as medical gynecology serves as referral base or "feeder" to the surgical gynecology practice, as medical gynecology patients sought care elsewhere, so too did surgical patients. As a result, the medical gynecology division needed to increase the volume of new and consult appointments with consultants without incremental consultant FTEs.

#### **AIM STATEMENT**

The medical gynecology team will increase the volume of new and consult (N&C) visits completed by medical gynecology consultants by 50% from 578 visits annually to 867 visits annually by December 31, 2020, without adversely impacting patient satisfaction on the access management section of the Press Ganey® survey.

#### **INSTITUTIONAL SIGNIFICANCE**

- Improved access to N&C appointments in the department allows for continued entry of new patients
- Establishment of a care team model, whereby consultant and APP staff share patients, creates efficiencies for patients and staff
- Improvement is anticipated to positively impact patient experience via highlighted teamwork across a care team vs. single provider, and improved accessibility for new and established patients
- Demonstrated volume and revenue growth without incremental FTEs allows for good financial stewardship

# MEASURE

### **IMPROVEMENT MEASURE BASELINE AND SAMPLE** SIZE

Improvement Measurement: 578 N&C appointments were completed by medical gynecology consultants in 2019 with a total of 2,045 N&C appointments across the medical gynecology team for the same time period. Consultant N&Cs therefore accounted for 39% of total N&Cs for the team.

#### **BALANCING MEASURE BASELINE AND SAMPLE SIZE**

Balancing Measurement: Press Ganey® surveys were provided to patients following their visit with the medical gynecology team in 2019, inclusive of 5,549 total visits (new, consult, and established visits). The baseline Press Ganey® top-box score for "likelihood to recommend" the provider across the medical gynecology team was 88.22% in 2019.

#### DATA COLLECTION PLAN FOR IMPROVEMENT AND BALANCING MEASURES

Total patient appointments within medical gynecology (new, consult, established) will be monitored monthly by provider via available Office of Access Management dashboards, yielding patient appointment data from Epic® EMR. Additionally, patient satisfaction data within medical gynecology will be monitored quarterly via the Press Ganey® guarterly provider reports and dashboard.

# BASELINE DATA- APPOINTMENT VOLUME

#### 2019 Medical Gynecology Team Appointment Volume



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### **POTENTIAL CAUSES**

By engaging stakeholders internal and external to the medical gynecology team, including surgeons, medical practice secretaries, schedulers, administrators, and nurses. the team was able to discuss the patient impact on limited new patient access and identify key themes:

- Patients were satisfied with establishing care with a consultant as a new patient and maintaining that relationship for all continued follow-up, though it was not the best use of consultant time and expertise
- Patient satisfaction with APP staff was excellent, as measured by Press Ganey® survey instruments
- Medical gynecology serves as the entry point into the department for many patients, also serving as a feeder to the surgical team and therefore continued new patient growth was imperative for department growth
- The medical gynecology team functioned as 5 independent providers with independent practices in current state

# IMPROVE

#### **INTERVENTIONS SELECTED AND TESTED**

In prioritizing interventions available to address the potential causes, implementation of a medical gynecology care team model, whereby new patients entered the practice via an N&C appointment with a consultant and were later transitioned to APP care, was selected as the intervention having the most potential impact on N&C appointment volume. This required revision of clinic templates, whereby consultants were templated for 10 N&C and 2 EST visits daily, and APPs were templated for 10 EST and 2 N&C visits daily.

4000

3500

3000

2500

2000

1500

1000

500

0

Total volume of medical gynecology appointments and patient satisfaction would be measured and compared for 2019 (preintervention) and 2020 (post-intervention).

#### **COMPARISON FOR THE IMPROVEMENT MEASURE**

- Results showed 92% growth in completed N&C appointments for consultants, and 40% growth in established patient appointments for APPs (578 consultant N&C in 2019 vs. 1,108 in 2020) (2,195 APP established visits in 2019 vs. 3,065 in 2020)
- Results also showed 35.1% growth in gross revenue for consultants in 2020 compared to 2019 and 1.1% growth in gross revenue for APPs in 2020. Overall revenue growth for the medical gynecology team was 10.1% in 2020. This growth is despite unexpected 3-month furlough of APP staff due to the COVID-19 pandemic.

#### COMPARISON FOR THE BALANCING MEASURE

 Patient satisfaction was positively impacted, as evidenced by an average 3.52% increase in top-box score for patients likelihood to recommend their provider across the medical gynecology team, as measured via Press Ganey® surveys in 2019 and 2020 (88th percentile score for 12 months pre-intervention vs. 91st percentile score for the 12 months post-intervention).

# **IMPROVEMENT- TOTAL APPOINTMENTS**

Medical Gynecology Team Completed Appointments



## MPROVEMENT- PATIENT EXPERIENCE



**LESSONS LEARNED** Patients are open and receptive to a care team model, whereby their needs are met by consultants and APPs working together. This model allow for improved patient access, highest scope of practice by medical professionals, and presents revenue opportunities without increasing FTE. Further, it creates a collegial and teamwork focused

environment across the department's team members.

#### HAND-OFF AND PLAN

Department leadership continues to monitor appointment volume and patient satisfaction scores to ensure patient access needs are met, while also maintaining excellent patient satisfaction. Success continued through 2021.

- 2019 Consultant N&Cs (medical gynecology): 578
- 2020 Consultant N&Cs (medical gynecology): 1,108
- 2021 Consultant N&Cs (medical gynecology): 1,233

# CONCLUSIONS

- The transition to team-based care improves patient access and throughput, patient satisfaction, and can increase patient care revenue without the addition of incremental provider FTEs.
- While this study was based in medical gynecology care, it remains highly translatable to other medical and/or surgical departments and divisions seeking to implement care teams.