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# Elective Management System

Initiative Type

Service Improvement

System Improvement

Status

Plan

Added

26 July 2017

Last updated

04 August 2020

URL

<https://cnxp3cuvtvrn68yjaibaht5ywrxspj7m.clinicalexcellence.qld.gov.au/improvement-exchange/elective-management-system>

## Summary

This project provided a more streamlined and fully electronic system to request elective surgery and procedure bookings to replace existing paper booking forms. This improved patient flow and

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administrative processes from the Outpatients department following through to Elective Surgery.

## Key dates

Jan 2015

## Implementation sites

Royal Brisbane & Women's Hospital, Redcliffe Hospital, Bundaberg Hospital, Logan Hospital, Hervey Bay, St George Hospital

## Partnerships

Royal Brisbane and Women's Hospital

## Key Contacts

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## Aim

To rapidly address the business need to enable details of waitlists and procedure bookings to be viewed online resulting in the ability to:

- Record and access accurate and timely bookings and wait list information across the state
- Search and review against current bookings and to effectively monitor wait list information
- View waiting list information from multiple facilities from any location state wide for approved users

## Benefits

- Improved management of patient bookings and reduced numbers on waiting lists by enabling –
- Identification of duplicate bookings for the same procedure at different facilities.
- Identification of duplicate procedure completed at different facility
- Identification of deceased patients on the wait list
- Visibility of patient wait list information between districts (can be used to redirect the patient request to another district where feasible)
- Improved planning and allocation of resources, procedure rooms, equipment and beds through –
- Accurate and timely information to care providers available online about the patient's planned elective admission (waiting list status and/ or proposed procedure date).
- Enhanced care based on timely access to information about a patient's planned procedure and treating medical professionals, in an emergency situation.
- Reduction in the number of misplaced patient bookings resulting in time efficiencies and management of the patient's health condition.
- Decreased administrative time required to process patient bookings using current paper based methods.

## Background

Where the nature and severity of a patient's medical condition requires surgical intervention, the length of time a patient waits for their surgery may be critical to the ultimate health outcomes for the patient. Therefore patient waiting times is often used as one of the key measures of health sector performance. This makes surgical waiting times an extremely sensitive political issue, which receives high media exposure. One of the highest priorities of the Queensland Government in terms of revitalising services for patients is to improve access and reduce waiting times to emergency departments, elective surgery and specialist diagnostic services – especially for those in rural and regional communities. QH has a number of systems which are used to manage waiting lists and

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bookings for elective surgery in public hospitals. Information collected to initiate the booking process is recorded on paper forms. A subset of this information is then transcribed into one or more of the above mentioned systems to complete the booking. At each of Queensland's public hospitals offering elective surgery, there is a unit responsible for entering the data, prioritising surgical lists, scheduling appointments and then coordinating all the necessary resources and activities to undertake the surgery. At the corporate level, the Healthcare Improvement Unit (formally Clinical Access and Redesign Unit) has responsibility for monitoring and improving access to QH services, including elective surgery.

## **Solutions Implemented**

- Held meetings with the facility project leads to determine how organisational processes could be adaptable for the use of EMS.
- Training manuals developed for Bookings, Medical and Facility Administrators.
- Super User Training provided, along with Administration (booking staff), Nursing and Medical staff for the smaller facilities.
- Provided additional support to the facilities by:
  - Facilitating the EMS application icon to be loaded onto the relevant PC's
  - Created EMS user access
  - Provide ongoing application support

## **Evaluation and Results**

At the completion of the Elective Management rollout across the state, the Department will undertake an extensive evaluation of the service improvement outcomes achieved through the introduction of the new system EMS.

## **Lessons Learnt**

- Culture change takes time.
- Time and workload constraints to obtain asset numbers and facilitate the application icon load
- Time and workload constraints to obtain user ID's and create accounts

