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# Centralised Audit and Confirmation Collaborative

Initiative Type

Model of Care

Status

Close

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27 July 2017

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<https://cnxp3cuvtvrn68yjaibaht5ywrxspj7m.clinicalexcellence.qld.gov.au/improvement-exchange/centralised-audit-collaborative>

## Summary

This audit examines whether, by implementing the Specialist Outpatient Strategy, Queensland Health has improved patient access to specialist outpatient services and reduced waiting lists. The model commenced under trial conditions with six specialties (highest demand). The auditing component focuses on all long waits and Category 2 and 3 patients at 60 and 300 day waiting counts

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respectively. The appointment confirmation pathway is delivered by the Health Contact Centre (HCC) and involves all Children's Health Queensland Hospital and Health Service (CHQ). The waiting list for confirmation is generated by CHQ and sent to the HCC daily and loaded on to SharePoint & QlikView information systems. Patient contact is initiated by HCC with up to eight attempts (maximum) made. Dependent upon the response to calls, patients will attend their appointment, have the appointment cancelled as they no longer require it, or have the appointment rescheduled. All calls are recorded which assists staff with complaints management processes. Where no response is received from the patient/family after eight attempts (maximum) and contact details checked, the treating clinician is more informed to remove a patient from the waiting list if they fail to attend a scheduled appointment. All removals generate a letter which is sent to the patient/family and the general practitioner.

#### Key dates

Feb 2016

Jul 2017

#### Implementation sites

Queensland Childrens, Hospital, Health Contact Centre Mt Gravatt

#### Partnerships

Health Contact Centre, Queensland Health

## Key Contacts

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## **Aim**

To improve patient access to specialist outpatient services for children by reducing the Failure to Attend rates, and ensuring all patients are seen within clinically recommended time frames and optimising patient flow and appointment utilisation.

## **Benefits**

- Clarity of true demand for outpatient services
- Improved efficiency of internal scheduling processes
- Reduction of patients waiting longer than clinically recommended
- Reduced median patient waiting times
- Identification of predictable attendance patterns
- Activity tracking and reporting visibility

## **Background**

In 2016, the Lady Cilento Children's Hospital (LCCH) CHQ, was experiencing escalating numbers of patients waiting longer than clinically recommended for outpatient appointments. A new process was proposed to cleanse the outpatient waiting list and thereby reduce Failure to Attend numbers (FTA) and long wait numbers, with a permanent outpatient auditing solution designed to align with the Specialist Outpatient Services Implementation Standard, improve the accuracy of the waiting list, and identify true service demand. The Centralised Audit and Health Contact Centre collaborative model was implemented in three phases – trial, expansion and consolidation. The additional component of appointment confirmation was added to the auditing process and commenced in March/April 2016 under a contractual partnership arrangement with the HCC.

## **Solutions Implemented**

## Evaluation and Results

- Patient access to specialist outpatient services for children has improved through reducing the FTA rate and increasing occasions of service
- Efficiency gains have been made in the use of clinician time with additional patients able to be seen and reduced long wait volumes (~5000 long waits)
- Proactive management of appointment cancellations and reschedules has created significantly improved functional efficiency (more patients seen and removed from waitlists each week)
- Communication processes have been better aligned with confirmation and attendance processes
- Strong clinical oversight still occurs with appropriate escalation pathways
- Positive feedback from parents; appreciate the contact

## Lessons Learnt

- start small and grow incrementally
- invest in strong partnerships (time, effort, money)
- ensure strong hospital engagement and buy-in occurs with key medical, nursing and administration stakeholders
- provide regular reporting/feedback to services and staff
- strong change management and staff / consultant engagement
- link closely to administrative wait list auditing