CASE STUDY

Improving access with a better telephony system

Otara Family and Christian Health Centre (OFCHC) has improved its efficiency and increased access for patients by implementing a telephony system to understand unmet demand.

Patients were struggling to access the clinic by telephone to make appointments, particularly during busy periods. This gave a poor impression at an important touchpoint in the patient’s experience and increased the number of people attending OFCHC’s walk-in service, which created a bottleneck at reception and reduced the time doctors had for planned appointments.

Business manager Roshan Fernando realised the practice needed data to understand the problem before they could introduce improvements to solve it.

“We engaged with our telephony provider to get data on how many incoming calls, answered calls, dropped calls and voicemail messages we had, as well as when our peak call times were and how long calls lasted,” Mr Fernando says.

When experts from OFCHC’s health network, ProCare, analysed the data, there were some surprises.

“We thought we were answering about 90 per cent of our calls, but actually it was only 67 per cent. We also thought calls were lasting for several minutes, when in fact the average was 47 seconds, so we were handling the calls we did answer quite efficiently.”

In addition, the data showed OFCHC that their peak call times were 8-10am and 3-5pm, and analysis of their call flows showed that calls coming in on the reception main line were handled more efficiently than those which went to the voicemail boxes of other staff.

“When we looked at our call flows we realised we had too many touchpoints. Patients could call nurses and GPs directly, which seemed like a good idea, but it assumed those staff had the time to take calls, and they didn’t.”
Having data to reinforce and understand the feedback from patients who said they couldn’t get through enabled OFCHC to tackle the problem with informed changes to their resource allocation and telephony processes.

“We allocated a telephonist to sit away from the front desk during peak call times to take phone calls without the distraction of all the other duties at the reception desk. We also changed the hours of some of our receptionists so we had more cover during busy times. That’s helped us to deal with demand during peak times.”

To make the response to voicemail messages quicker and use staff time more efficiently, OFCHC centralised and simplified their telephone system. Extra voicemail boxes managed by clinical staff were removed, leaving a single generic voicemail box managed by the receptionists, who notified relevant staff of voicemail messages by instant messaging, email notification, or adding a call-back request into a GP or nurse’s template.

An expectation for staff to respond to voicemail messages within four hours was set, and a voicemail monitoring system was added to Mr Fernando’s Outlook programme so he could check responses were timely.

As a result of the improvements, the answered call rate has risen from 67 per cent to 87 per cent, and the unanswered call rate has dropped from 27 per cent to 11 per cent.

“Patients are getting a better quality telephone service and more consistent access. And our reception staff are less stressed because they’re providing a good service with a system that works,” says Dr Harley Aish, GP.