Aim
To reduce Outpatient Wait times with the use of virtual technology

Context
In recent years, significant challenges have been highlighted surrounding fair and equitable access to our Health Services. Studies have also reported that population health at the national level presents a picture of decreasing mortality rates and a rise in life expectancy over the past ten years. As part of the Strategy for Integrated Services 2016-2020, Virtual clinics have been identified as a way to greatly enhance prevention and chronic disease management services. A combination of the above factors contribute to the increasing demand and high expectations in relation to healthcare in the outpatient setting.

What are we trying to accomplish?
To deliver care aligned to the goals and objectives of the HSE Outpatient Services Performance Outpatient Programme 2016-2020
To promote the use of virtual clinics through proof of concept within the RCSI HG group
Improve efficiency within an OPD setting and provide Patient-Centred Care
Fostering an increased efficient use of MDT time

Plan:
• Identify and engage key stakeholder to ensure buy in
• Decide what relevant data we require
• Consult with existing Virtual Fracture clinic in Midland Regional Hospital Tullamore
• Alternative option to Fracture clinic identified and proceeded with

Do:
• Gathered data of existing, successful Virtual clinics – Glasgow Royal Infirmary
• Mapped patient pathway for Virtual fracture clinic
• Developed, in conjunction with the MS team, a checklist to capture the outcome of each virtual clinic appointment.

Study:
Analysed data gathered of existing, successful virtual clinics to identify appropriate specialties that can undertake a Virtual Clinic initiative
Reviewed HSE documents to ensure policies and procedures were adhered too;
• Strategy for design of integrated OP services 2016-2020
• NTPF Waiting List Management Protocol 2017

Act:
Pilot Virtual MS Clinic commencing in Beaumont December 2018 with review in January 2019

What We Did

Obtained stakeholder approval to proceed with implementation of Virtual MS Clinic
Through interdisciplinary collaboration we designed a new patient pathway and checklist document for use in the MS virtual clinic
Established a start date to begin pilot virtual MS Clinic in Beaumont Hospital December 2018

Key Recommendations:
Audit clinic statistics over a three month period to review and analyse findings
Handover to the Beaumont Neurology MS Team
Develop a questionnaire to establish patient satisfaction for the virtual MS clinic
Identify other areas where a virtual clinic can be adapted, help reduce wait times and strive towards improved patient-centred care

Key Learning
• Obtaining Clinical Stakeholder engagement was essential to the success of the project
• Some outpatients clinics require restructuring to accommodate virtual clinics
• Project direction may change over time
• Time Constraints to narrow focus

References
1Department of Health Key trends 2017
2Strategy for design of integrated OP services 2016-2020
3www.fractureclinicroadesign.org/the-virtual-clinic/

Acknowledgements
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Team
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