

The establishment of a quick outpatient appointment system in Seoul National University Hospital (SNUH)

- To activate timely treatment for severe/acute/rare/refractory/incurable first-visit patients

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**isqua2024.
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INTRODUCTION

There is the phenomenon of Patient concentration in the Seoul metropolitan area's tertiary general hospital due to the rapid development of public transportation such as KTX(high speed train), the expansion of road networks, and policies to strengthen health insurance coverage. The general public expects large-scale, state-of-the-art equipment, rapid introduction of new technologies, and many famous doctors to provide high-quality medical services, and as if shopping, they choose two of more hospitals to receive duplicate appointments and over-treatment. As patients are increasingly concentrated in the upper level, metropolitan area, and large hospitals, the number of waiting days for outpatient treatment at Seoul National University Hospital is increasing, which makes it difficult for patients with severe/acute/rare/refractory/incurable conditions to get timely treatment.

AIM

The average waiting days for new outpatients at SNUH is more than 40 days. Due to the delay, many new patients may miss the right time to treat them.

- A quick outpatient appointment system for severe, rare, refractory and incurable patients through patient classification based on the medical assessment is needed.

-In Korea, patients with difficult and complex severe diseases according to the patient classification can receive timely and appropriate treatment at higher general hospitals and keep them more safe and healthy.

-To contribute to the promotion of national health as a national, global and central hospital.

RESULTS

- 1) Ratio of new patient slot among outpatient sessions : 3% (target not achieved)
- 2) Telephone Response rate of New patient call : 73% (target not achieved)
- 3) Telephone Response rate for Institutional request : 70% (target not achieved)
- 4) Number of professors presenting standards for quick reservation patient : 232 (target achieved)
- 5) Number of professors presenting standards for quick reservation patient and allowing additional slots : 147 (target achieved)
- 6) Number of additional slots used quick reservation: Average of 43 cases per month (target achieved)
- 7) New patient slot utilization rate (excluding clogging): 80% (target not achieved)
- 8) Monthly average number of new reservations : 5,776 (target not reached)
- 9) Monthly average number of quick reservations : 162 cases (target achieved)

Classification	a key index	2022 results	Goals	2023 results	Remarks
Structural indicators	Ratio of new patient slot among outpatient sessions	3 %	4 % (1% increase)	3 %	Non-fulfillment
	(Referral Team) Telephone Response rate of new patient call	72 %	75 % (3% increase)	73 %	Non-fulfillment
	(Referral Team) Telephone Response rate for institutional request	71 %	74 % (3% increase)	70 %	Non-fulfillment
Process indicators	Professors presenting standards for quick reservation patient	177 people	186 people (5% increase)	232 people	attainment
	Professors who suggested the criteria for quick reservation patient and allowed additional slots	84 people	88 people. (5% increase)	147 people	attainment
	Number of additional slots used quick reservation (per month)	17 cases	more than 30 cases	43 cases	attainment
	New patient slot utilization (excluding clogging)	80 %	83 % (3% increase)	80 %	Non-fulfillment
Result Indicators	Number of Reservations for Referral Team (per month)	5853 cases	6029 cases (3% increase)	5776 cases	Non-fulfillment
	Number of quick reservations for Referral Team (per month)	132 cases	139 cases (5% increase)	162 cases	attainment

METHOD

- Individual mailing work to all MD professors to check the criteria for patients in need of quick treatment.
- Share new manual through Google Spreadsheet to staffs who do all the bookings of new patients
- Medical department(doctor) and outpatient nursing team meetings
- Attendance of the outpatient Session Steering Committee to secure and maintain the new patient slot and express opinions
- Multi-department cooperation (Outpatient care team, Process Innovation Team, Patient Safety Management Team, etc.)
- Introducing a work phone to download the image of the medical request form.
- Selection of medical staff and appreciation ceremony for active cooperation in the quick reservation

CONCLUSIONS

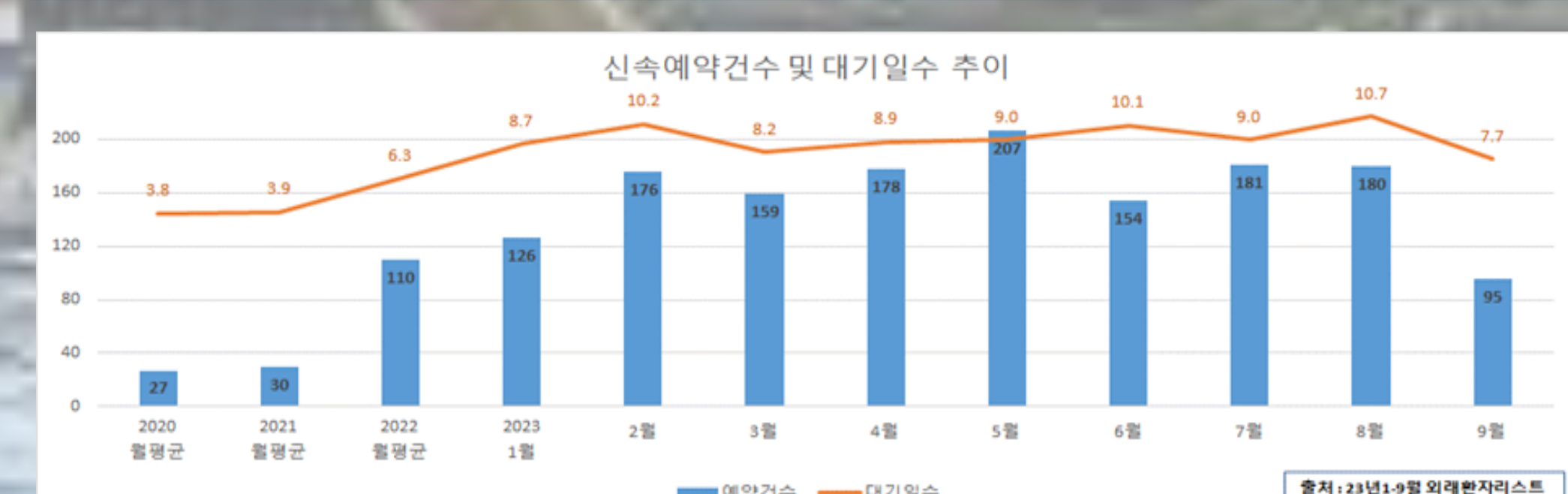
- Produce and utilize standardized quick-new patient reservation manuals
- Nurses in the SNUH Referral team play a key role as a communication channel for timely cure process with outpatient nursing teams, medical doctors, and external medical institutions.
- For the first time in Korea, rapid reservation standards have been established for situations and diseases that require timely reservations for each medical staff, and have become the cornerstone of the timely reservation system.

ACKNOWLEDGEMENT

The gratitude goes to the SNUH Referral center members who worked on this project together and to all the SNUH medical staff who provided their support.

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