
CONFERENCE ABSTRACT

Closing the Gap

17th International Conference on Integrated Care, Dublin, 08-10 May 2017

Ciara Scott

HSE, Ireland

Introduction: This process change was introduced in one HSE Regional Orthodontic Unit to improve patient flow and access to care for children very prominent front teeth. (IOTN Grade5a)¹

Patients are referred by primary care to the orthodontic service. The wide variation of age and urgency makes sequential waiting lists unbalanced and inefficient. Long sequential waiting lists create bottlenecks. Perception of wait encourages even younger referrals.

Many growing IOTN5a patients have a 'window of opportunity' when treatment will be most efficient and most effective. After this window, patients may need referral to tertiary care to access orthognathic surgical treatment within acute services. This is more demanding for the service and for the patient. A new system of referral and prioritisation was required to improve patient flow and access to treatment at the right time.

Aims and objectives: To develop and implement a clinical protocol using NCEC Guidance for IOTN5a patients to start treatment, based on the best clinical evidence for the timing of treatment and cost-effectiveness of treatment.

Method: A retrospective review of 115 completed IOTN5a cases measured the bottlenecks in patient flow in the old system. Using the HSE Change Model, the new process was implemented, using the protocol to record an indicative date for treatment to start. A key performance indicator was developed to measure compliance with protocol and to measure the new quality standard.

Benefits and Results: This process change was successful in improving IOTN5a patients' access to start treatment at the right time. Improved patient flow increases capacity and reduces demands on tertiary services, reducing the duration and cost of treatment. Further evaluation of outcome measures is required.

Conclusion: This quality improvement is patient-centred, but the balanced score card evaluation outlined benefits for all the stakeholders. There is a cost-benefit to the service by providing treatment at the most efficient and effective time. This process change could be extended for other IOTN criteria.

Keywords: orthodontics; patient flow; cost-effectiveness
