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Capacity & Demand: Link to Increasing Access to Family Planning Services

Region II Title X Training Center

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Call in Number:



Objectives

- Examine the concepts of demand and capacity and how they relate to clinic operations
- Understand how to measure demand and capacity
- Examine how to utilize demand and capacity to increase access to services

Doing More With Less

“The increased demand placed on public health organizations to perform better and improve health outcomes with less funding cannot be achieved under the design and operation of the current system.¹”

¹Riley, J. et. al., “Realizing Transformational Change Through Quality Improvement in Public Health,” *Journal Public Health Management Practice*, 2010, 16(1), 72-78.

Title X Program Goals/Outcomes

1. Increasing the number of unintended pregnancies averted by providing Title X family planning services.
2. Reducing infertility among women attending family planning clinics by identifying Chlamydia infection.
3. Reducing invasive cervical cancer among women attending family planning clinics.
4. Cost per User - HRSA Standard: Cost per Title X Client³
 - ✓ 2010: \$258.87/Client and 2011: \$269.55/Client

Additional pertinent indicators include screening for other sexually transmitted diseases (STDs) that are treatable and preventable and have significant maternal and peri-natal long-term implications (syphilis, gonorrhea, HIV).

IOM Report – May 2009

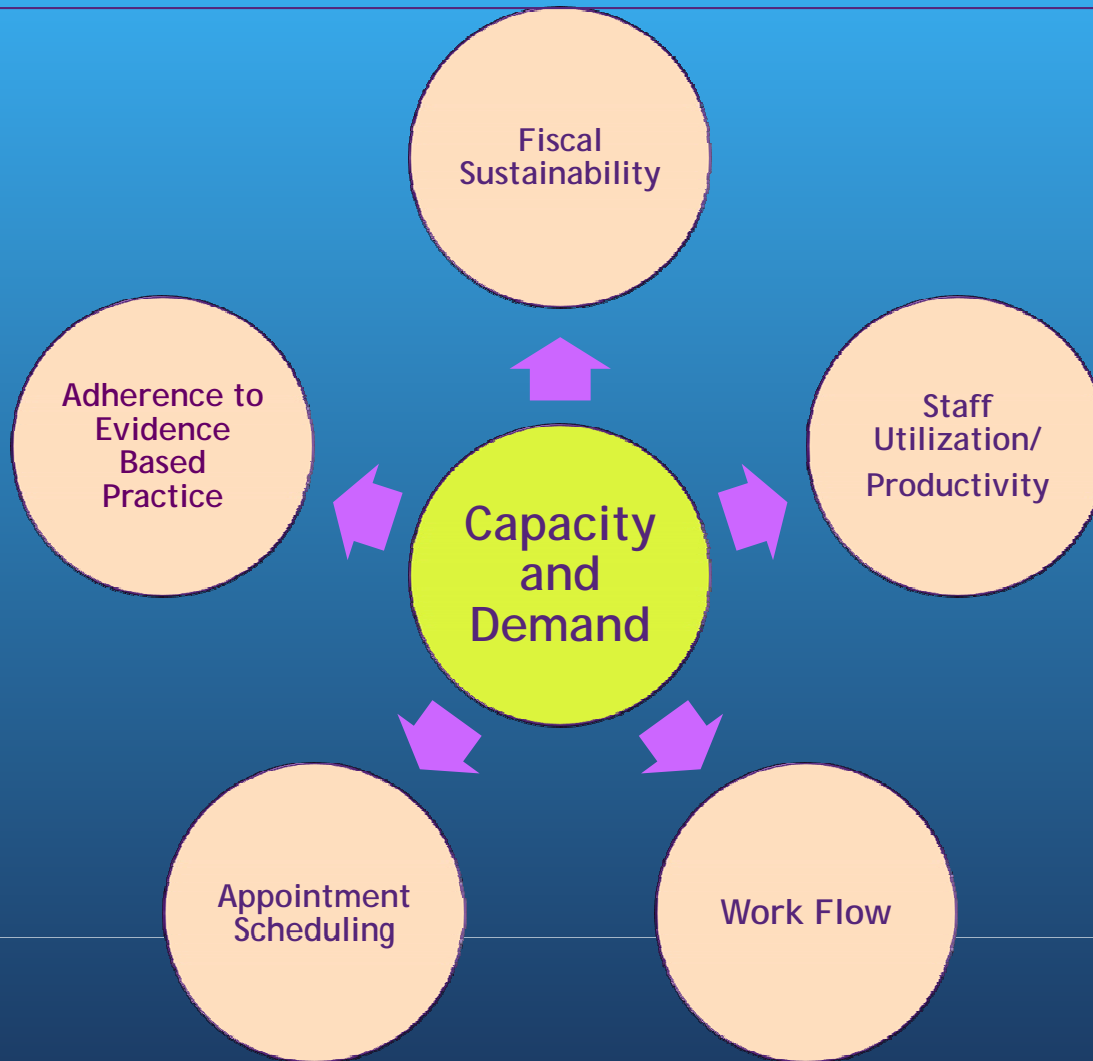
“While the core mission of the program (Title X) has remained clear over the years, a shifting and expanding set of operational priorities, along with a growing number of individuals requesting care and increasing expenses with no significant expansion in funding, has made it difficult for the program to fulfill that mission.² “

². “A Review of the HHS Family Planning Program: Mission, Management, and Measurement of Results,” May 2009, <http://www.iom.edu/Reports/2009/A-Review-of-the-HHS-Family-Planning-Program/>

What is Clinic Efficiency?

“Maximizing the use of resources to the maximum number of clients.”

Domains of Clinic Efficiency



Why Demand and Capacity

- It is the foundation for understanding Clinic Operations and how to expand services
- It is the key developing:
 - Patient appointment schedules that maximize access
 - Staff productivity goals
 - Patient visit goals
 - Staffing patterns (including staff scheduling)
 - Title X Program Budget and projecting fiscal requirements

DEMAND

- Request for visits
- Number of visits
- Type of visits
- Duration of visits

CAPACITY

- Number of rooms
- Hours of clinic operation
- Number of staff
- Skill mix of staff

**Service Delivery
Patterns**

Staffing Patterns

**Appointment
Scheduling**

What is Demand?

- Is a measure of the volume of patients on a daily basis
- Demand can vary by day, season, time of day
- Demand **is predictable and measurable**
- A proxy measure for demand is the percent of users who are seen in the clinic each day

How to Measure Demand

- To measure demand:
 - N = the number of patients in a period (1 year)
 - A = the number of office visit during the period
 - T = the number of session days during the period
 - P = the percent of patient seen each day or
 $A/N*T$
 - Daily Demand = The percent of Patient seen each day times the number of patients per year

Demand Calculation

| Client Demand | | Formula | 2010 |
|---------------|---------------------------------------|------------------|-------|
| U | # of Unduplicated Users in Year | | 1,655 |
| V | # of Visits in Year | | 3,856 |
| D | # of Business Operations Days in Year | | 208 |
| P | % of Clients Seen on Average Each Day | $V \div (D * U)$ | 1.12% |
| | Daily Demand by Patients | $P \times U$ | 18.54 |

Demand – Other Considerations

- Existing habits can impact demand:
 - Phones not being answered
 - Cancelling clinic sessions
- Demand can be significantly affected by individual provider practices and staff
- What might affect your demand?

Assessing Demand

- Demand needs to be balanced with capacity
- Too much demand in relation to capacity creates chaos

Capacity

- **Capacity** is the number of patients a clinician is able/expected to see in a session/hour/day
- Restated, capacity measures provider service capability.
- There are several options for determining your capacity to serve patients

Calculating Capacity

- If you know the average time a clinician spends with each patient you can calculate your capacity.
- Our experience with Title X clinical providers reveals that on average, across all visit types, a provider spends between 12 and 16 minutes in face to face contact with a patient in the delivery of clinical services.

Example: Calculating Capacity

- Calculating Capacity at **Clinic A**
 - 1FTE Clinician time allocated to site
 - Average clinical hours (per FTE) available per clinic session = **7 hours**
 - Average sessions/year = 200 multiplied 7 hours/session = 1,400 clinical hours available annually (84,000 minutes)
 - Average clinician time per patient visit = **15 minutes**
 - 84,000 clinical minutes available divided by 15 minutes/patient = 5,600 patient visits annually
 - 5,600 patient visits annually/200 sessions = **28 patient visits/session**

Capacity - Other Considerations

- Number of Exam Rooms
- Administrative Time
- Workflow and Bottlenecks

Capacity vs. Appointment Template

- 1. How many visits do you schedule per clinician for a session or day?**
- 2. Does that equal the capacity?**
- 3. What is your no show rate?**
- 4. Do you limit any specific appointment types on the schedule**

Analysis of Example

- Current Demand - 18.54 visit per session
- Current Capacity - 28 visits per session
- What would you consider?

Demand is Greater than Capacity

What can be done to reshape capacity and/or reshape demand?

- ✓ Maximize the use of non-clinical staff to reduce visit/clinician volume
- ✓ Streamline visit [limited service provision]
- ✓ Examine patient revisit protocols

Capacity is Greater than Demand

What can be done to reshape capacity and/or reshape demand?

- ✓ Reexamine staff scheduling
- ✓ Reexamine staffing patterns
- ✓ Expand menu of clinical services
- ✓ Recruit new clients through expanded outreach and marketing

Concluding Remarks

- ✓ Assessment of Capacity and Demand is the starting point in planning for the design and delivery of Title X services
- ✓ It is an essential step in shaping and can be a valuable tool in exploring opportunities to expand access
- ✓ This is not rocket science
- ✓ Use common sense
- ✓ Make it work for your site

Questions?

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