

E-scheduling at the AZ St Jan General Hospital in Bruges

AZ St Jan General Hospital has gone the way of online referrals and online bookings. On top of its enterprise-wide scheduling system, it implemented a referral and booking portal, enabling physicians to refer patients to the hospital and patients to book their own appointments

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AZ St Jan is a public, multispecialty 900-bed general hospital situated a few kilometres outside the historic centre of Bruges in Belgium. As a teaching hospital, it has strong ties with various universities and academic bodies across the country.

AZ St Jan was among the first Belgian hospitals to open up to the outside world. The BIAN project (Brugs Interactief Artsennetwerk – the interactive physicians' network of Bruges), launched in 2005, gives participating physicians from the region (GPs as well as referring specialists) access on an individual basis to information regarding the patients referred by them. The information includes administrative data such as admissions and discharges, as well as medical data such as exams and/or operation protocols, medical images, and so on. The system is highly secure (authentication of outside users is via tokens), and it functions well and quickly.

Scheduling in the hospital

Scheduling of outpatient appointments as well as of imaging exams is done using the scheduling system UltraGenda Pro, integrated with the hospital information system (HIS) and the radiology information system (RIS). The scheduling system has been rolled out to almost all departments and clinics. Its wide acceptance is due to its user-friendliness on the one hand, and to its extreme parameter ability – that is, its capacity to store rules – on the other. Slowly but steadily, departments have started opening up their schedules to enable other departments to book appointments with them directly, so, for example, the gynaecology department can directly book appointments for mammography in the medical imaging department.

First attempts at e-bookings

In 2005, UltraGenda proposed UG Broka, a booking portal application for referring physicians. The solution offered the substantial advantage of fitting perfectly into the BIAN strategy and architecture and of integrating seamlessly with the underlying scheduling system, UltraGenda Pro. UG Broka enabled authorised physicians to book appointments in the hospital directly for their patients, based on online, interactive authorisation forms under total control of the hospital departments.

However, while the system worked very well from a technical and security point of view, it was never really accepted by the referring physicians. As much as they liked the idea of referring patients online, they did not want to waste their time doing appointment bookings. We immediately felt that this reaction was fair and justified, and were comforted when UltraGenda reported similar feedback from other sites in other countries.

Necessary adjustments

By late 2007, UltraGenda had adjusted the concept of UG Broka, which resulted in a fundamentally new version of the product. In the new version, UG Broka consists of not just one portal application, but two – one for referring physicians and one for patients. In other words, the referring and booking subprocesses have been split, so that the entire process has become more natural. Each of the actors involved in the process has a clear, distinctive role:

- The hospital: defines the referral and booking rules.
- Referring physicians: refer the patient according to the referral rules.



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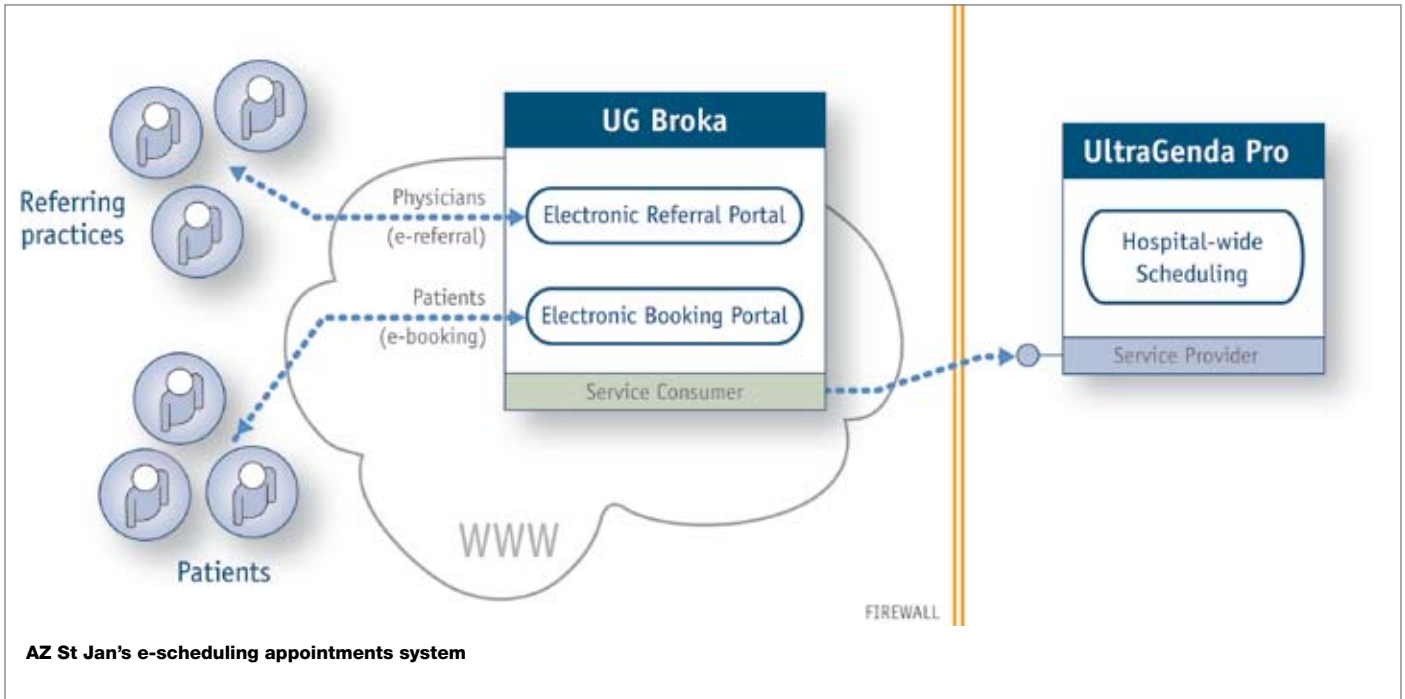
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- Patients: book their appointment according to the booking rules.

The physician is no longer expected to book the appointment – as was the case in the initial version – but can just refer the patient. Based on the physician's entries, the system either authorises the referral or denies it. This is done in the physician portal of UG Broka.

The actual booking is then left to the patient to conduct, either in the traditional way, via telephone, or via the patient portal of UG Broka.

The present system

The referring physician refers the patient via interactive referral forms or protocols, defined by the hospital. Obviously, each referring physician will have their own individual access profile to referral protocols. A referring GP will have the ability to refer a patient for a specialist visit in, say, cardiology, whereas a referring cardiologist may refer for, say, a coronary angiography.

The (online) authorisation of the referral contains a unique ID that the referring physician can print off and hand to the patient. The patient then has two options – to make their appointment by phone or by the patient portal. If the patient calls the hospital, then booking staff are able to trace the referral in UltraGenda Pro on the basis of the unique ID given by the patient. Booking staff then convert the referral into an appointment and confirm via letter or email. In the second scenario, the patient accesses the patient portal of UG Broka, integrated in the hospital's website, submits their unique ID and picks up the

referral. Since the referral contains all relevant details such as department, appointment type, urgency and so on, UltraGenda is able to automatically offer a number of free slots that respond to the referral criteria. The patient chooses a free slot and confirms the booking.

An additional advantage of the new approach is that patients who frequently need to visit the hospital without being referred (eg, renal dialysis patients) can get their unique ID directly from the department and schedule their treatment all by themselves.

Patients, including those who have not booked their appointment online, can view their upcoming appointments and relevant instructions in the patient portal, provided they have received their unique ID. Given the extreme parameter ability of the system, (certain) patients can even be given the right to cancel (certain) appointment types under (certain) conditions.

About UltraGenda ...

UltraGenda is a Belgian ISV that specialises in web-native booking and scheduling solutions for healthcare. The company's flagship product, UltraGenda Pro, is installed in more than 100 leading hospitals across Europe. UG Broka is UltraGenda's e-referral and e-bookings portal, which is seamlessly integrated with UltraGenda Pro

Results

Apart from the usual teething problems, it is fair to say that the system works admirably as regards security, functionality and speed of transaction. It meets the major actors' prime concerns in the sense that it offers parameter ability, respect of rules and security to the hospital departments and a quick, efficient way to refer patients to the referring physician. As far as the patient is concerned, it responds to increasing demands to participate in the booking process via the internet. At this stage – some four months after start of production – the number of online bookings is still limited. However, it is increasing month by month.

Challenges

The challenge is no longer technical or functional – the system works, and is fast and secure. The challenge is now cultural, and especially so for our own physicians. Indeed, many of them are still afraid of opening their schedules for e-bookings, fearing that referring physicians or patients will violate their rules, have access to their own confidential data or fill their schedules to a greater extent than they would wish. And although all these parameters are under their control, it remains a huge task to explain and prove this to them.

Work also remains to be done on the part of the referring physicians. Since they do not know by heart which departments have published their referral protocols and which haven't, many physicians still find it easier to print off a referral letter from their practice management system rather than referring the patient online. Hence, the more our

own physicians will adopt the system, the more referring actors will use it.

The number of patients who convert their appointments online is still small. However, they do appreciate the fact that the unique ID is all they need to make a booking via telephone, and many of them do review their appointment and the relevant instructions and information via the patient portal.

Further prospects and outlook

As the current approach only offers wins to each of the main actors, potentially it is nothing less than a revolution. It will help us further cut down our workload for an administrative task that has no real added value. Indeed, once the system is well tuned, the appointment booking can be done as efficiently by one actor (the patient) as by two (the patient and the secretary). This will enable us to concentrate on our core task, caring for the patient.

At the same time, and since all referrals meet the referral requirements, our doctors are sure to find the "right" patients booked for a certain exam or procedure, and to have their own, personal or clinic rules fully met.

As more and more departments enable online referrals and online bookings, referring physicians will use the system almost automatically, relieving them of the administrative burden of having to write a letter.

Finally, the patient will become more and more familiar with e-bookings.

Even when the future looks bright for all the parties involved, the resistance to change remains present at all levels, and "evangelisation" remains a task for months – if not years – ahead. ■

