

## Keeping a steady flow

### Executive Interview

**Sid Mandel explains how technology can help ensure patients move efficiently – and happily – through the waiting room.**

### How would you describe the behavior of patient flow in a physician's waiting room?

**SM.** Patient flow in the doctor's waiting room behaves less like an orderly queue and more like a cloud, from which patients need to be called according to complex logic. This cloud is made up of different types of cases, including people admitted based on first-come-first-served; patients with appointments who take priority, assuming they arrived on time; patients who are too late for their appointment (and whose priority might somehow still precede random walk-ins); patients who walk in and got prioritized based on level of urgency (possibly by a triage nurse); patients who previously visited the doctor, got sent to a series of lab tests, and now come back with results; and so on.

Specific clinics often have other particular types of cases with unique behavior. For instance, patients visiting an ophthalmologist might be asked to wait 20 minutes for dilation to take effect, and then be called to the doctors according to their original order of arrival.

### What are the challenges in dealing with this type of patient flow, and how can they be dealt with?

**SM.** The first challenge is creating a system that handles all these cases, and can decide at any given moment who – of all waiting patients – should be called next, weighing in all the different priorities and factors. Second, this complex logic needs to be made transparent, so that each patient feels he or she is treated fairly and provided good care.

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A simple numbering system is not enough to tackle these challenges, and any attempt to force such a system into complex scenarios would usually result in angry patients, frustrated doctors and total disorder. Instead, a specialized system of patient flow management needs to be implemented.

### **What type of patient flow management system would you recommend?**

**SM.** Systems such as Q-nomy's Q-Flow software can automatically handle all common cases by applying business rules, which on one hand assign a priority to each case, and on the other hand set clear limits for maximum waiting that prevent lower priority cases from being overtaken again and again and never get called.

Such a system would also allow very particular algorithms to be rapidly programmed to support the requirements of any site – such as the ophthalmologist's clinic. Specialized systems like Q-Flow also provide appropriate presentation tools, which can be used to provide patients with clear indication of their priority and when they are going to be called.

### **What are the basic tools used in such a system?**

**SM.** The basic tools are LCD screen displays (replacing the old LED signs that only show the 'next in line' number). LCD displays provide enough room to show a number of different queues (such as appointments, walk-ins, returning patients, and so on) and to show more than one patient per queue. All patients can see where they are on the display, and can feel relaxed knowing there's a consistent method at work.

For patients who will need to experience a long wait, more advanced options can be offered – for instance, to wait at a nearby cafeteria and be notified using SMS when they need to get back to the waiting room. The bottom line is, clinic patient flow is one complex challenge where good automated technology can make people (patients and doctors alike) more happy and relaxed than any human intervention – as well intended as it may be – ever could.

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***Q-nomy Inc.** develops, sells and implements software solutions that help organizations optimize the customer experience in their branches or stores.*

*Our flagship product is Q-Flow<sup>®</sup>, a unique software package integrating customer flow management and branch campaign management. Q-Flow is being used by customers around the world, in various industries such as telecom, healthcare, government, retail, banking and more.*

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