

Creating Healthy Smiles

Sydney Dental Hospital and Oral Health Services



Sydney
Local Health District

Dr Trupta Desai, Jimmy Varghese, Saanchi Varma

Case for change



- Patients at Sydney Dental Hospital & Oral Health Services (SDH & OHS) face delays in accessing care due to high demand and often wait beyond recommended times as per the NSW MoH. Delayed access leads to increased patient complaints and poorer health outcomes which further lead to emergency presentations.
- Investigation showed that only 45% of general dental treatment demand could be met in-house with the remaining 55% managed through Oral Health Fee for Service Scheme (OHFFSS) vouchers as an adjunct measure to in-house treatment. However, since July 2023, new controls were introduced to prioritise and optimise in-house activity and minimise vouchers.
- In response, the Creating Healthy Smiles project was commissioned to address backlog and inefficiencies in the general dental treatment waiting list to ensure prompt access to dental care, reduce patient complaints and improve clinical outcomes.

Goal

By December 2024, increase timely access to care for general dental patients at Sydney Dental Hospital and Oral Health Services.

Objectives

- By December 2024, increase the general dental patient treatment capacity/demand ratio (excluding vouchers) from 23.3% to 45% per month.
- By December 2024, decrease the number of patients placed on Code C (medically compromised patients) general dental treatment waiting list from 1729 to 1383 (20%).
- By December 2024, reduce the amount of patient complaints that relate to access to oral health services from an average of 20 per month to 15 per month.

Method



We used the Centre for Healthcare Redesign Methodology supported by the Agency for Clinical Innovation (ACI). In the initiation phase we scoped and defined the project through engagement of Key Stakeholders.

During the diagnostic phase we completed:

- Process mapping sessions to map the current state (5 sessions involving 65 staff members)
- Stakeholder (4) and patient interviews (10)
- Historical complaint and compliment analysis
- Patient Reported Experience Measures (810 completed surveys for Aug 2023 analysed)
- Tag along observations (6)
- Data analysis
- Issue logs and discussion of themes
- Root Cause Analysis
- Prioritisation of themes with the Sponsor and Steering Committee



In the solution design phase, we completed three workshops with relevant stakeholders. Four working groups were established during the implementation phase to progress the three solutions.

The project team also completed benchmarking with five other Oral Health Services across NSW Health and conducted a literature review to enhance their understanding and progress the solutions.

The working groups report to the steering committee on progress of solutions monthly via the project team to ensure sustainability until business as usual has been achieved.

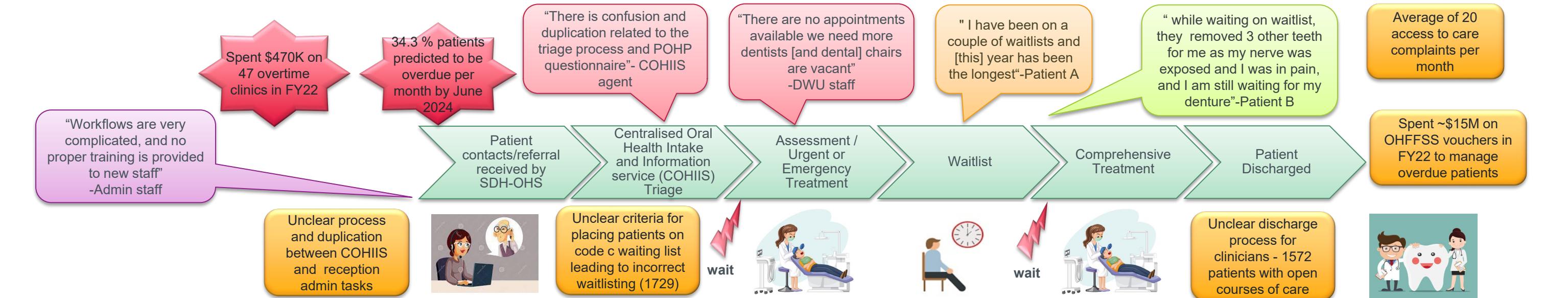
Key issues

Using redesign methodology and engaging with key stakeholders, diagnostic work identified 89 issues through speaking with patients, staff, process mapping, tag along observations, data analysis, root cause analysis and prioritisation of themes. Capturing the patient experience was paramount to achieving the goal of the project.

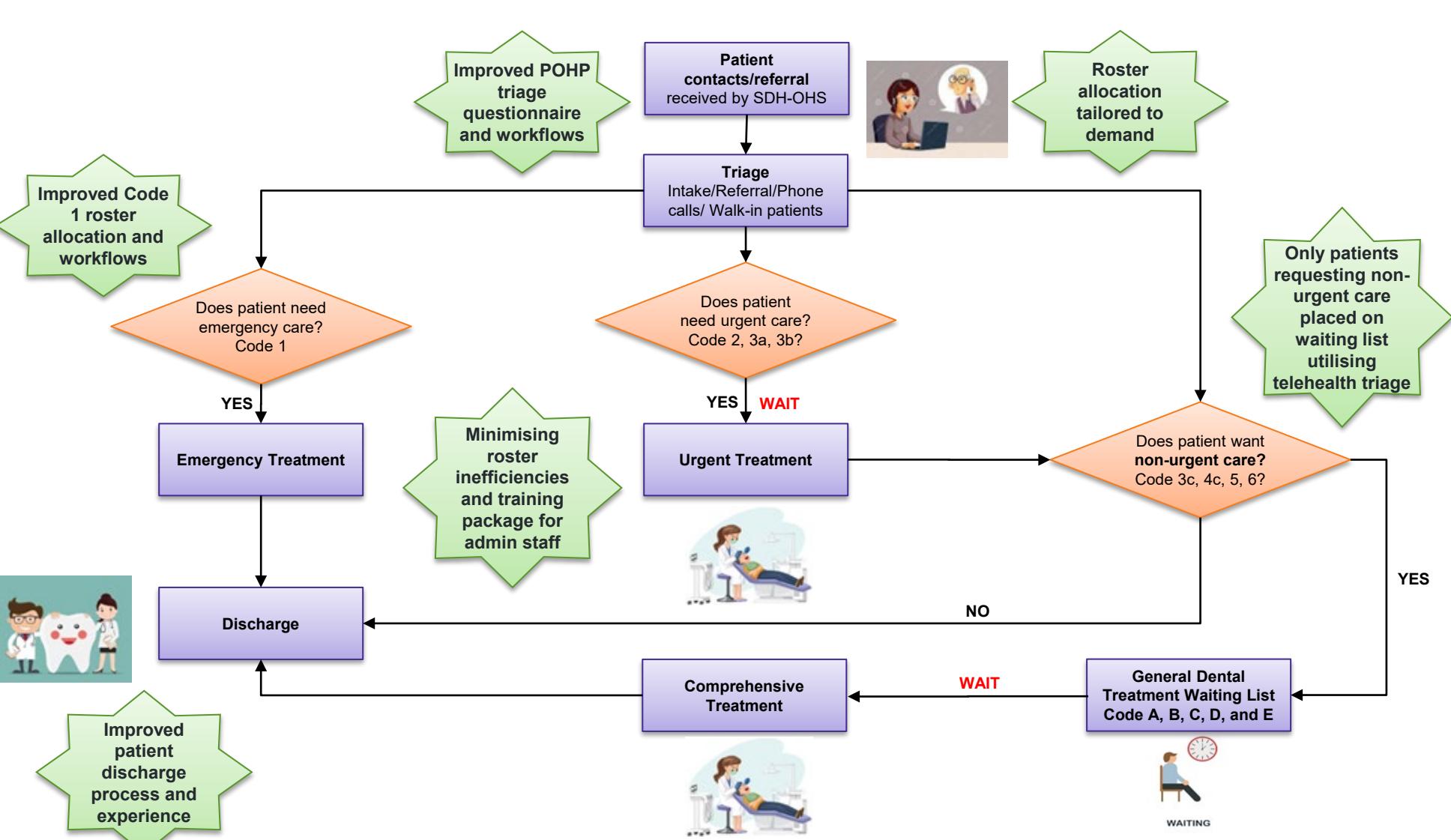
The main issues identified were:

- Rostering issues related to ongoing demand and capacity.
- Lack of process clarity and duplication related to administrative tasks including unclear waitlisting process as per criteria set by NSW MoH for code C (medically compromised) patients and unclear discharge processes.
- Inefficiencies related to clinical time utilisation.
- Inefficiencies in triaging and appointment booking processes.
- Significant backlog in general dental treatment waiting list due to introduction of new controls to issue OHFFSS vouchers and demand outweighing capacity to manage treatment in-house.
- High number of patient complaints related to access to care and emergency presentations.

Current Process (as is)



Vision (future state)

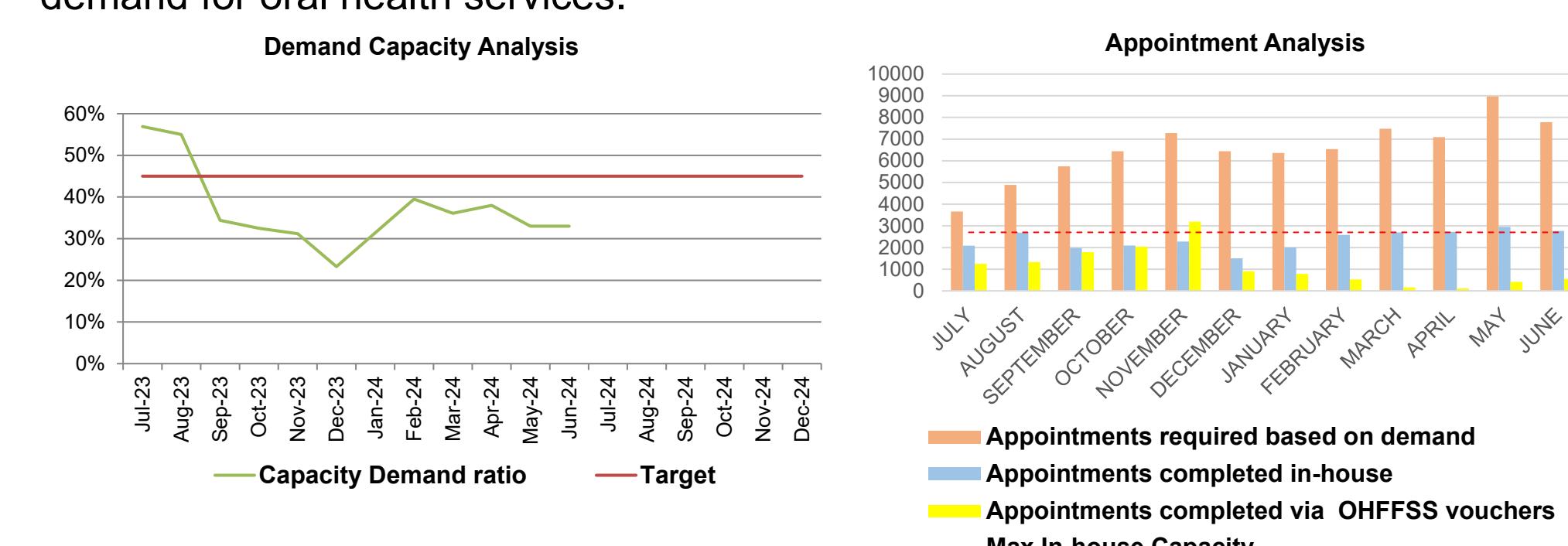


Results

The project is currently in the implementation stage; the below graphs illustrate progress to June 2024.

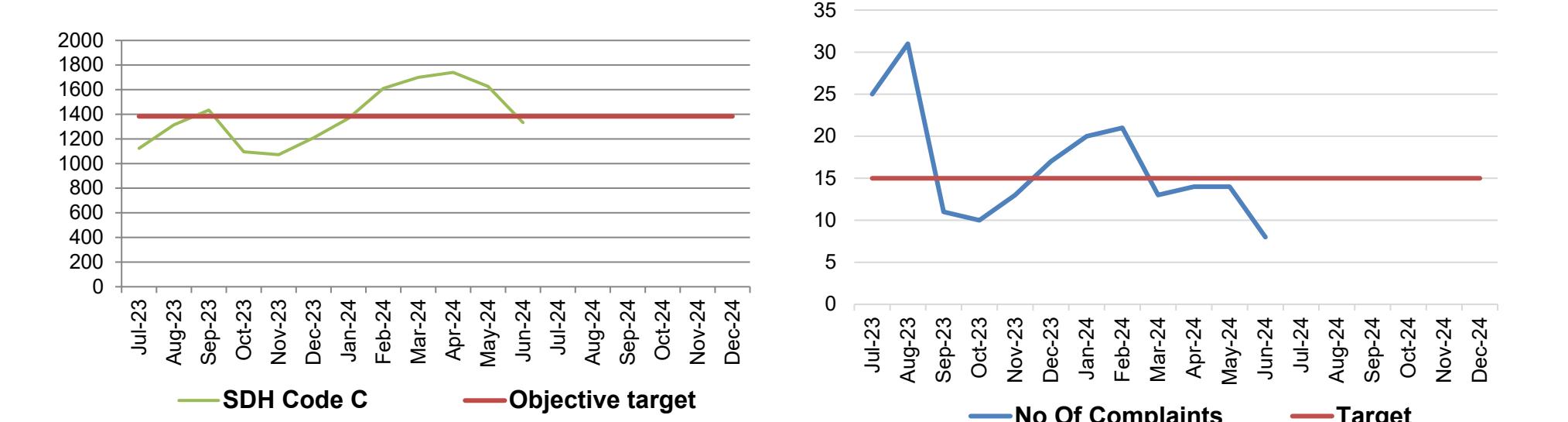
Project Objectives

Objective 1: Though internal capacity has been maximised, demand and capacity ratio is trending lower than set target due to increase in number of triages and demand for oral health services.



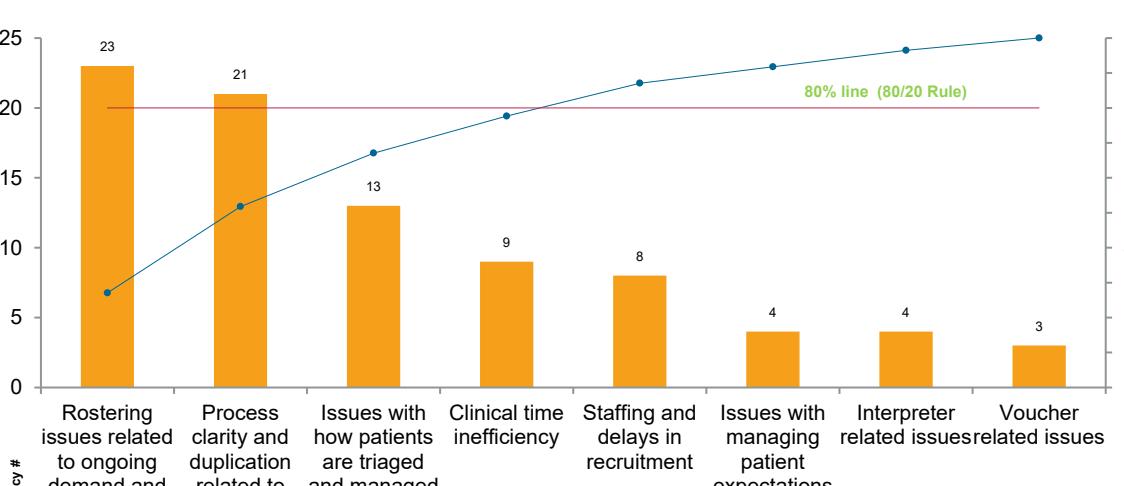
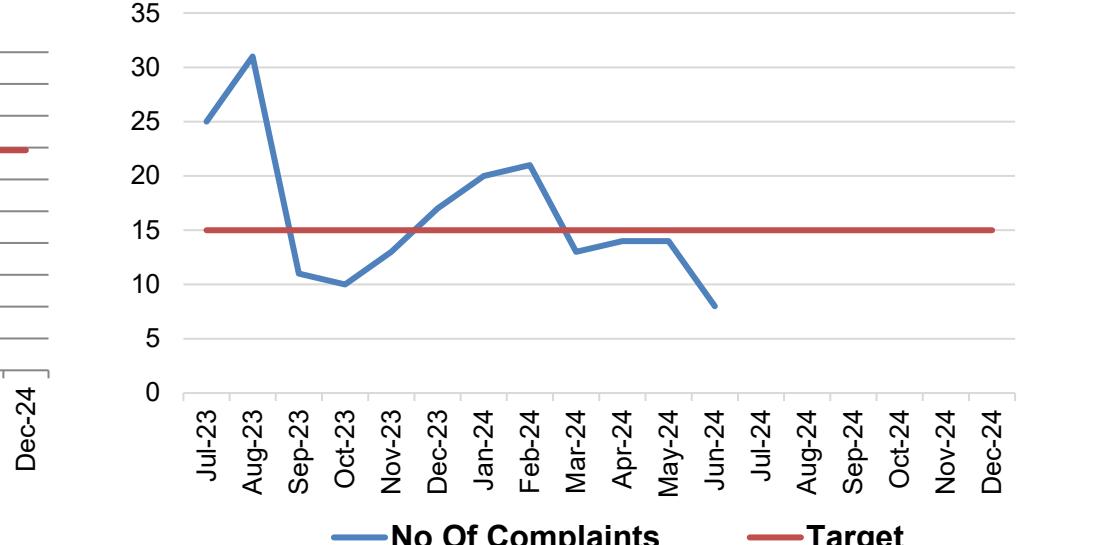
Objective 2:

No of patients on Code C waitlist



Objective 3:

No of complaints per month



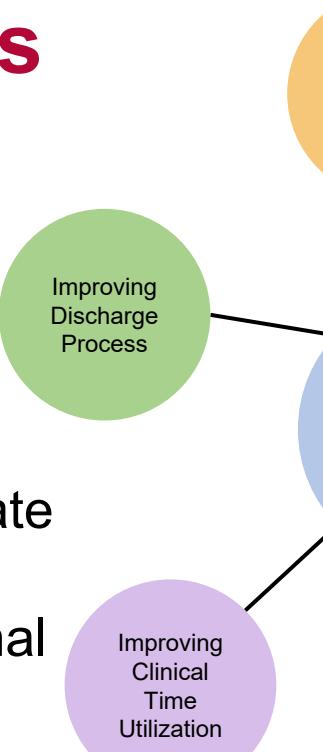
Planning and implementing solutions

Solutions were designed using the brainstorming technique, Power of Three (Radical, Different, Usual) with stakeholders including clinicians, administrative staff and managers.

Solution 1: Redesigning the Triage Process: Improved workflows and training package for Centralised Oral Health Intake and Information Service (COHIS) staff to ensure accurate and consistent triaging of patients as per Priority Oral Health Program (POHP) criteria. Dental students will manage additional urgent appointments to enhance capacity.

Solution 2: Defining the Discharge Process: Educating clinicians on proper discharge protocols. Improving clinician understanding of POHP Code C criteria to correctly waitlist patients.

Solution 3: Optimise clinical time utilisation: Enhance timely appointment booking and rostering process by introducing new roster templates and telehealth pre-appointment processes.



Sustaining change

Solution ownership has been distributed through the three solution Working Groups. The Working Groups include key team members from Community Oral Health Clinics (clinicians and administrative staff), COHIS and Demand and Waiting list unit.

The Working Groups are required to report against key performance indicators monthly to the Steering Committee, through the solution owners who also sit on the Steering Committee. The Steering Committee is chaired by the Project Lead – Reporting on outcome measures against project objectives, PDSA cycles, project risks, issues and reinforcement strategy are all standing agenda items.

Conclusion

This project represents a significant milestone in our ongoing commitment to delivering high-quality and efficient oral health services. Through meticulous planning and collaboration with key stakeholders and consumers, we have streamlined processes, reduced patient waiting times, and enhanced overall patient satisfaction. Importantly, all the solutions that derived from this project are potentially scalable to other Oral Health services and facilities.

Top three lessons learnt:

- To manage the overall demand for general dental services, along with improving in-house activity, SDH & OHS need to better plan and utilise a voucher strategy as an adjunct.
- It is better to refine the project objectives at a later stage of the project than persevere with the wrong objectives just to stay the course.
- The importance of a clear implementation plan, having the right people in working groups and consulting with consumers to ensure successful and meaningful implementation.

Moving forward, the experience from this project will guide us in continuous improvement efforts ensuring we remain at the forefront of excellence in oral health care. This journey marks the beginning of sustained growth and innovation, driven by our shared vision of providing the best possible care for our patients.

Acknowledgements

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COHC Clinical and Admin Staff, COHIS and DWU Admin Staff

Creating Healthy Smiles Steering Committee

Solution Working Groups

Consumers

Contact

Project Team

Dr Trupta Desai (Head of Department Community Oral Health Clinics, SDH & OHS, SLHD)

trupta.desai@health.nsw.gov.au

Jimmy Varghese (COHIS Manager) jimmy.varghese@health.nsw.gov.au

Saanchi Varma (Operational Support Manager) saanchi.varma@health.nsw.gov.au

