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# Specialist Outpatient Bookings for LCCH Inpatients

Initiative Type

Redesign

Status

Deliver

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<https://clinicaexcellence.qld.gov.au/improvement-exchange/lcch-inpatients>

## Summary

The Inpatient Unit to Specialist Outpatient Booking Redesign Project conducted a detailed audit of over 50,000 medical records has informed the current state, and provided the impetus to redesign the system. The project team had to consider the impact of seven different systems in the context of a rapidly changing digital state across the health service and to date has engaged with over 2,700 stakeholders.

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## Key dates

Nov 2015

Nov 2016

## Implementation sites

Lady Cilento Children's Hospital

## Key Contacts

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## Aim

To establish a standardised that ensures reliability with the identification and completion of a Specialist Outpatient Department (SOPD) booking for patients being discharged from LCCH Inpatient units (IPU's).

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## **Benefits**

A standardised process for LCCH inpatients that will complement the planned automation and digitisation of outpatient follow-up.

## **Background**

The Inpatient Unit to Specialist Outpatient Booking Redesign Project was commissioned in November 2016 at the request of the Children's Health Queensland Health Emergency Operations Centre (HEOC). The HEOC had been stood up in October 2016 as a response to the identification of unreliable systems and processes underpinning the inpatient booking of outpatient appointments of patients discharged from an inpatient episode of care at the Lady Cilento Children's Hospital (LCCH).

## **Solutions Implemented**

The IPU to SOPD booking redesign project used the clinical services redesign methodology. This entailed a rigorous diagnostic phase, and a detailed solution design. This redesign project interfaced with and was informed by the CHQ Discharge Appointment Audit Project (DAAP). This tranche of work was tasked with the identification and remediation of specialist outpatient bookings for LCCH inpatients. Dynamic methodology underpinned the DAAP process, LCCH clinical data was extracted via Crystal Business Intelligence reporting tools with clear and explicit parameters for data extraction, quality assurance principles, recording of review findings.

## **Lessons Learnt**

This complex activity demonstrated the effect of applying the methodology to an identified problem, potentiating clinical and non-clinical staff buy-in to the change, sustaining improved outcomes, whereby LCCH inpatients reliably receive appropriate and timely outpatient follow-up on discharge.